



## The Itchy Horse

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Every year in mid to late summer we start to see horses presented to the vets at HEVC looking much like the pictures below. These horses are severely pruritic (a fancy name for itchy) and initially have urticaria (small lumps) over their top lines and trunk and then atopy (hair loss) and variable degrees of skin lesions from small abrasions to scabs and sores.



The most common cause of the aforementioned symptoms is the “itch” also known as “Queensland Itch”. A more correct terminology would be recurrent seasonal pruritus. The itch is caused by an allergic reaction the horse has (most commonly) to bites from midges (*Culicoides* sp.). The effects on horses can be dramatic. They suffer intense pruritus (itchiness) on the mane, tail, face, ears and back, resulting in biting, rubbing, hair loss, self-trauma and a change in temperament. They become miserable and irritable.

Hair loss is common in the areas that are being rubbed, usually along the midline, face, ears, mane and tail base. The hairs will be coarse, broken and stubby and will often be standing on end. Crusts, scales and scabs appear in the coat, especially on the base of the tail and around the ears. While horses don't die from 'Queensland Itch', badly affected horses are of little use as working or pleasure animals as the itching makes them difficult to work. The damage to their coat also makes them look terrible.

Treatment involves treating the symptoms of the allergy as well as preventing or minimising the horse's exposure to the cause of the allergy. A consultation with a vet is important to rule out other causes for your horse's skin condition (eg. Rain scald, ring worm, scabies, lice etc). The vet will also be able to discuss with you treatments available to help settle down the allergic reaction and itchiness as well as treating any secondary bacterial infections that may be present. Often the vet will prescribe and/or give corticosteroids as well as topical washes and/or creams and occasionally systemic antibiotics depending on the case. Corticosteroids such as dexaforte and/or prednisolone can have significant side effects such as laminitis and this will be discussed at the time of the consultation.

Treating the symptoms alone is unlikely to resolve the allergic reaction and reducing the exposure of horses to midges and mosquitos is an extremely important step in helping horses with this condition. Because midges are most active just prior to and at dusk, one approach to reducing exposure would be to bring horses into a stall with a heavy air current, which is possible through the use of fans. Horses should be sprayed or rinsed with insecticides with residual activity e.g. pyrethrins or pyrethroids, such as Flyaway, Permaxin Insecticidal Spray or Swift according to label recommendations. From a nutritional perspective, supplementation with omega-3 fatty acids can also be helpful as well as placing oils on the skin to help improve the skin's natural barrier to infections which is often diminished with this allergic condition.