

## Say Ahhh!

A two and a half-year-old filly that we were riding one fall developed a hacking cough. In spite of the cough, the filly looked well, ate well, and was bright eyed and full of energy. Not wanting to irritate the condition we decided to quit riding her to see if she would get over it. The cough disappeared. We thought we had it whipped. After a couple of weeks we were ready to try her again but as soon as the exercise level caused the filly to breathe heavily, the coughing resumed.

Puzzled, we loaded the filly up and took her to the Texas A & M Veterinary School for a more complete examination. There it was determined that her upper respiratory track was inflamed, possibly from an inhaled irritant such as dust. A broad spectrum antibiotic was prescribed and all exercise that might cause heavy breathing was prohibited.

Again the cough went away. The antibiotics were withdrawn and the training intensity was stepped back up. Again, that nagging cough returned.

Checking back with Texas A & M and talking to some "knowledgeable" older trainers, we were advised to turn the filly out on pasture for at least 6 to 8 weeks. We did that. At the end of 2 months we put the filly back in training. This time there was no coughing - just an occasionally sudden expulsion of air.

This happened forty years ago. Since then we have seen this scenario played out hundreds of times and we have learned much more about this condition.

It seems that some young horses get a form of tonsillitis.

As you know, we, too, have glands in our throats called tonsils. When these glands become inflamed and irritated, they produce puss. These sore throats cause us discomfort and coughing spells. We use antibiotics to treat the condition but it has a habit of returning periodically throughout our adolescent years. To eliminate the problem, in the past many doctors recommended that these glands be surgically removed in children as young as 2 to 3 years of age.

Horses, on the other hand, do not have localized tonsil glands. The tissue cells that make up the tonsils are scattered throughout the throat. This makes

for a diffuse distribution and surgical removal is much more difficult, if not impossible.

Much of what we now know about these glands in the horse is due to the advances in technology. An endoscope enables us to see down the throat of the horse and observe the activity of these diffuse tonsils.

Adolescent horses between the ages of two and three, just like children, tend to have inflammation of these cellular glands. Once these glands get irritated they form blister-like structures which produce puss. Air rushing around the back of the throat during heavy breathing irritates the blisters, which triggers the coughing reflex. (This is why horsemen refer to this problem as BLISTERS.)

This condition often follows an upper respiratory infection such as a cold.

Treating this condition in the horse is about as difficult as treating it in humans. Once upon a time, the vet would use a hot metal spoon-like instrument to try to sear the throat in an attempt to eliminate the tissue. This treatment was not as effective as a tonsillectomy and the treatment was possibly more traumatic than the disease.

Another more benign approach is to treat the infection topically by placing a narrow spectrum antibiotic directly into the glottal pouches located on each side of the throat. This met with some success and we used this approach on young racehorses that we did not feel could miss any time off from training for financial reasons.

So, the next time you have a young horse that coughs as soon as it starts breathing hard, we suggest that you have your vet endoscope his throat to see if his tonsils are inflamed. And remember that if the treatment doesn't work, you can follow the advice of the horsemen of yesteryear: Turn the horse out for about 2 months and, most of the time, the condition will heal itself.

— Dr. Jim and Lynda McCall

For more information,  
visit the McCalls at their Web site:  
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