Strangles in horses

Information for veterinarians and horse owners

What is strangles?

Strangles is a highly contagious and serious disease of the upper respiratory tract in horses, donkeys and mules, caused by the bacterium *Streptococcus equi* (subsp. equi). The disease may affect horses of any age but most commonly affects young horses that have had no previous exposure or vaccination.

Clinical signs and diagnosis

Infected horses generally develop strangles within 3 to 14 days of exposure. Signs include:

- an elevated temperature (39.5 to 40.5°C)
- coughing, loss of appetite and difficulty in eating and breathing
- hot, painful and inflamed lymph nodes around the throat and the head
- a thick, yellow, pus-like discharge from the nose
- burst abscesses around the throat and/ or the head.

Outbreaks commonly occur through direct contact. This happens when:

- susceptible horses are in direct contact with infected/carrier horses
- new horses are introduced onto a property
- large numbers of horses are assembled at an equestrian event or racetracks.

Outbreaks of disease also occur through indirect contact with contaminated stable equipment, feed, water buckets, tack or people. Bacterial shedding may be intermittent and horses can occasionally become long-term carriers without displaying symptoms. Diagnosis is based on clinical signs. However, your veterinarian may wish to collect nasal swabs or abscess samples for laboratory diagnosis to confirm strangles.

Treatment

Because strangles is so infectious, seek immediate veterinary advice if you suspect the disease. In cases where clinical signs are not severe, the best treatment is good nursing under veterinary advice. Anti-inflammatory medication reduces the temperature and pain or swelling associated with the disease. Antibiotics are not always required but horse owners should seek advice from a veterinarian. Treat burst abscesses by washing the affected site with warm water and an antiseptic solution. Most horses will recover within a few weeks.

In rare cases, the disease can lead to serious complications that are often fatal, such as:

- bastard strangles, where the infection spreads to other parts of the body
- purpura haemorrhagica that causes inflammation and haemorrhaging of peripheral blood vessels, potentially leading to severe oedema (swelling) of the head, limbs and other parts of the body.



Prevention

A strangles vaccine is available.

Best practice prevention

- Give a course of 3 primary vaccination doses at fortnightly intervals from the age of 12 weeks, with annual booster vaccinations thereafter.
- Adult horses with an unknown vaccination history should use the same protocol, followed by an annual booster.
- Adopt sound biosecurity practices at all times when dealing with horses.
 - Infected and in-contact horses should be kept isolated from other horses for 6 to 8 weeks in order to prevent the spread of the disease.
 - Maintain strict hygiene practices when tending strangles-affected animals.
 - Isolate and monitor new horses to your property for 3 weeks.

Emergency animal disease exclusion

Strangles is not a notifiable disease in the Territory. However, the clinical signs of strangles are similar to a number of exotic and emergency diseases of horses that are notifiable, including African horse sickness virus, glanders (*Burkholderia mallei*), equine influenza virus and epizootic lymphangitis (*Histoplasma farciminosum*).

To report unusual signs of disease in horses, call the emergency animal disease hotline on 1800 675 888 or your regional veterinary or livestock biosecurity office.