



Choke

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Choke (equine esophageal obstruction) is a common problem caused by impaction of food material in the esophagus. Unlike human choke, horses are able to breathe during a choking episode because the trachea (windpipe) is not involved. However, this does not mean swift medical attention is not needed. Choke can occur in any horse at anytime but occurs more commonly in horses that have improper mastication (chewing) due to poor dentition, are greedy eaters or are on a pelleted ration.

Horses with choke will usually look depressed and stand with their neck outstretched, have a nasal discharge containing saliva and feed material, salivate excessively, cough repeatedly and make frequent attempts to swallow. If a horse is suspected to be choking, feed and water should be removed to prevent further impaction of feed material in the esophagus.

Treatment of choke usually involves administering a sedative and oxytocin. The combination of the sedative and oxytocin causes relaxation of the esophageal musculature and lowers the head of the horse to facilitate lavage. Once the horse is sedate, a nasogastric tube is passed to the location of the obstruction. Water is gently pumped through the nasogastric tube to break down the obstruction. Water and feed material are often expelled from the mouth and nasal passages during this procedure. Verification that the choke has been resolved is made when the nasogastric tube passes through the entire length of the esophagus, into the horse's stomach.

Once the obstruction has been resolved the horse should be held off feed for 12 hours and allowed free choice water. A diet of fresh grass or complete pelleted feed slurry is recommended for the next few days. Anti-inflammatory drugs and antibiotics are often recommended due to irritation that may have occurred from the obstruction and the possibility of pneumonia from aspiration of materials during the choke.