

Ringworm

Ringworm is a highly contagious fungal infection of the skin. It is spread either directly from horse to horse by contact, or indirectly via tack, grooming aids, infected rugs or clothing. Other species in particular cattle can also be a source of infection. Good hygiene is essential to control the spread of infection. The spores can survive in the environment so once one case is seen on a yard other cases often appear. The incubation period is 4-30 days so by the time a horse shows symptoms the disease may have spread to other horses on the yard.



CLINICAL SIGNS

Infection gains entry through damaged skin so it is seen particularly where tack and rugs rub such as the girth, side of the face, shoulder etc.

The signs seen usually follow this sequence:

- small groups of hairs stick up, often in circular patches 5-20mm diameter;
- scale and crust accumulate within these patches which expand and join together to form extensive areas of flaking skin looking a bit like cigarette ash;
- infected hair shafts break off leaving bald patches which heal from the centre;
- clumps of infected hairs may be pulled off leaving a oozing wet surface in some cases.

The condition is usually self limiting and resolves in six to eight weeks but should be treated because it looks unsightly and is a source of infection for other horses.



Key points

- Ringworm is a fungal infection of the skin.
- It is the most common contagious skin disease in horses.
- Most outbreaks occur in the Autumn and Winter months.
- Infection can spread to humans so disposable gloves should be worn by people handling affected horses.
- The fungal spores left in the environment are very resistant so good stable hygiene and proper cleaning of tack is essential to minimise infection and control spread.



DIAGNOSIS

A diagnosis may be strongly suspected on the basis of the appearance of the skin lesions.

Diagnosis is confirmed by:

- microscopic examination of a hair sample;
- fungal culture to identify the type (takes up to two weeks);
- skin biopsies can also be used to assist in the diagnosis of difficult cases.



ENSURE ALL HORSES HAVE THEIR OWN SEPARATE EQUIPMENT

Treatment/Prevention

Treatment doesn't significantly shorten the course of the disease (normally six to eight weeks) but it limits the severity of infection and reduces the spread to other horses and the environment.

Treatment involves:

- topical treatment with a prescription fungicidal spray or shampoo;
- clipping and scab removal and burning of the removed hair and skin materials;
- individual lesions and surrounding hair can additionally be scrubbed daily for 7-10 days with 10% Povidine Iodine or 2.5% Lime Sulphur.

Prevention of spread

- Affected horses are not permitted to appear at racecourses or competitions.
- Affected individuals should be isolated and their tack and grooming equipment kept separately.
- Loose boxes and trailers occupied by affected individuals should be cleaned and disinfected thoroughly.
- Fungal spores are present in the soil/bedding, removing and burning old bedding and spraying the stable with anti-microbial disinfectants is recommended to minimise the spread of infection.
- Ensure all horses have their own dedicated grooming equipment, tack and rugs.



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