



What is a nephrosplenic entrapment?

A horse's large colon is anchored to the abdominal wall only at its beginning and terminal ends. Therefore, a large loop of intestine is free to shift out of its normal position and move about the abdomen. This predisposes the horse to various types of twists and displacements. Nephrosplenic entrapment is a displacement that occurs when the large colon becomes trapped between the left kidney, spleen, and the ligament that runs between these two organs. As there is usually little damage to the bowel from the entrapment, surgical correction normally simply places the bowel in its normal position.

December 2007

Photo: Michelle Counce is holding Diamond with Dr. Joe Fisch. This photo is post-colic surgery .

Success Story

MICHELLE SAYS, "DR. JOE TOLD ME I HAD A FIGHTER"!

Diamond, owned by Michelle Counce, was admitted **AVS Equine Hospital** on October 26, 2007 after being seen by her regular veterinarian. Her regular veterinarian diagnosed a nephrosplenic entrapment and had tried medical treatment that included phenylephrine and rolling the horse to try and release the piece of small intestine caught between the spleen and kidney. Because this treatment was unsuccessful Michelle's regular veterinarian referred her to **AVS Equine Hospital**.

Upon arrival, **Diamond** was tachycardic (increased heart rate), normal temperature & respiration, gums were pink and capillary refill time was equal to 2 seconds. Nasogastric intubations gave 7 liters net reflux, so no mineral oil was administered. Rectal palpation discovered multiple loops of distended small intestine. Transabdominal

ultrasound confirmed the diagnosis of nephrosplenic entrapment. An abdominal tap revealed an increased total protein but no red blood cells or bacteria. The decision was made to go to surgery as medical treatment had already been attempted.

In surgery the nephrosplenic entrapment was relieved by the **AVS Equine Surgery Team** and the entrapped section of small intestine was still viable so no resection was needed. She was then sutured and recovery went well. **Diamond** continued to reflux for an additional 12 hours but then stopped and recovered without additional complications. She was released on November 2, 2007 on antibiotics and instruction to clean the incision site daily.

Michelle asked **Dr. Joe Fisch** to please review her management program because this was her third colic between two horses in a short period of time. **Dr. Joe Fisch** had a few recommendations that Michelle says she is now following. The first big change she made was starting a twice daily feeding program instead of giving them one big meal. Michelle also switched to the daily Strongid C2X wormer and is using the highly digestible Nutrena Safe Choice feed, along with adding Platinum Performance to her feeding program.

Michelle said that not only does she think her horse's are benefiting from the new program, but it is giving her peace of mind!



