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EQUINE DISEASE QUARTERLY

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IN THIS ISSUE

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A PREVIEW OF THE APRIL 2026 EDQ

This month's *Equine Disease Quarterly* highlights several fundamental aspects of equine health and disease that may be easy to overlook because they seem simple, routine or unlikely.

This month's "Research Spotlight" focuses on insulin dysregulation in aging horses and features the Ph.D. thesis work of Morgan Askins, a graduate student in Dr. Amanda Adams' laboratory. The article discusses factors that influence the insulinemic response in horses with insulin dysregulation.

Drs. Maria Polo and Lutz Goehring report on an important feature of monitoring for infectious diseases — body temperature. The temperature, pulse rate and respiratory rate (T, P, R) are useful indicators of baseline health, with an elevated body temperature being a particularly helpful indicator of systemic infection. Their article notes that digital thermometers may provide more accurate results when two or more serial readings are taken during a single incubation period — in other words, allowing the thermometer to remain in place a little longer.

While body temperature is a key indicator of patient status, disaster preparedness is equally essential for responsible care. Dr. Lynne Cassone reviews general disaster-planning principles for farms of all sizes and highlights considerations that are easy to overlook, including infectious disease preparedness, vaccination status and documentation of equine infectious anemia status. She also provides additional resources to help owners tailor plans for specific threats.

Dr. Hossam El-Sheikh Ali expands on his recent "Research Spotlight" feature from the January 2026 issue with a focused article on focal mucoid placentitis. Early detection and reliable treatment remain major challenges, and Drs. El-Sheikh Ali and Rebecca Ruby are leading efforts in these areas. Dr. El-Sheikh Ali outlines practical ways breeders can help advance efforts to reduce abortions associated with this disease.

Finally, Drs. Lutz Goehring and Edward Olajide provide an update on hotspots of equine infectious disease spread, including the reappearance of contagious pustular dermatitis, a relatively new disease first detected in Scandinavia and caused by equid parapoxvirus. Alongside other emerging threats in North America, including New World screwworm (see July 2025 EDQ), these developments underscore the continued need for awareness, vigilance and preparedness.

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An ariel photo of the Linda Mars Aged Horse Care and Education Facility at the University of Kentucky. Photo courtesy of UK Martin-Gatton College of Agriculture, Food and Environment.

Nutritional Management Strategies for Insulin Dysregulation

In the equine industry, few conditions are as concerning and frustrating as insulin dysregulation (ID). ID is a complex endocrine disorder affecting a large percentage of the equine population and is the defining characteristic of equine metabolic syndrome (EMS). Most critically, ID increases the risk of laminitis, a painful and potentially career- or life-ending condition.

Current management strategies focus on restricting pasture access and feeding low nonstructural carbohydrate (NSC) rations. While widely recommended, these approaches have historically relied on limited scientific validation, particularly regarding how ID horses respond to pasture and long-stem forages of varying NSC concentrations, and restrictive grazing strategies. Morgan Askins' doctoral research at the University of Kentucky seeks to fill these knowledge gaps by generating data driven recommendations that help veterinarians and horse owners proactively manage this devastating condition.

Understanding the Impact of Pasture and Seasonality

Seasonal fluctuations in pasture NSC concentrations pose a continual challenge for managing ID horses. To better understand this relationship, insulin concentrations were monitored in ID and non–insulin dysregulated (NID) horses for two 24-hour grazing periods in late summer and spring. Elevated pasture NSC levels were associated with significantly increased insulin concentrations in ID horses. Importantly, when ID horses were removed from pasture and housed on a drylot with low NSC hay, insulin concentrations decreased rapidly and remained reduced within 24 hours. These findings highlight both the metabolic sensitivity of ID horses to pasture carbohydrates and the effectiveness of rapid dietary intervention.

Long-Stem Forages and the Insulin Response

A five-week randomized crossover study evaluated the insulin response to six long-stem forages with varying NSC concentrations in both ID and NID horses. Although two of the forages contained <10% DM NSC, they still produced an augmented insulin response compared to a negative control (low NSC pellet). Results suggest that feeding more than 0.13-0.135 g NSC/kg body weight per meal may result in an exaggerated insulin response in ID horses. These findings emphasize that total NSC intake per meal, not only percentage NSC on a forage analysis must be considered when developing feeding strategies for ID horses.

Restrictive Grazing Strategies: Evidence for Practical Tools

To better understand real-world management practices, a nationwide survey assessed the use of restrictive grazing methods in the U.S. A total of 91% of respondents reported utilizing at least one restrictive grazing strategy, most commonly grazing muzzles or dry lots, to prevent or manage laminitis or excessive weight gain. Grazing

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muzzles were most frequently used for nine to 12 hours per day during spring and summer.

To evaluate the effectiveness of grazing muzzles, nine ID horses were monitored during four, 10-hour summer grazing periods using a replicated 2×2 crossover design. Horses grazing with a muzzle demonstrated significantly lower insulin concentrations compared to unmuzzled controls, under low-moderate pasture NSC (6.0-13.8% DM) conditions. This data provides scientific validation for a commonly used management tool.

Advancing Proactive Management of Insulin Dysregulation

Collectively, this body of work highlights the critical influence of seasonality, pasture NSC content, forage intake, and grazing management strategies on insulin dynamics in ID horses. The findings support the use of dry lots with low NSC hay and grazing muzzles as potentially effective tools to reduce the insulinemic response in ID horses.

However, ongoing monitoring remains essential. NSC concentrations can fluctuate rapidly with environmental conditions, and individual metabolic responses vary. By refining feeding recommendations through controlled research, these studies aims to improve equine metabolic health, reduce laminitis risk and provide veterinarians and horse owners with practical, scientifically validated tools for managing ID horses.

About the Researcher

Morgan J. Askins earned her Master of Science in agriculture with an emphasis in equine nutrition from Tarleton State University in 2019. She completed her Bachelor of Science in agriculture with a concentration in animal science and a minor in entrepreneurship at Western Kentucky University in 2018. Askins' doctoral research focuses on ID and nutritional management strategies to mitigate hyperinsulinemia-associated laminitis in horses. Her work has been presented at national and international scientific meetings, including the American College of Veterinary Internal Medicine Forum (ACVIM), the Global Equine Endocrine Symposium (GEES) and the Equine Science Society Symposium (ESS), where she received recognition for her graduate oral presentation. Through her research, Askins aims to advance understanding of equine metabolic health and contribute to improved, evidence-based nutritional management strategies for horses affected by ID.

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Left, members of the aged horse herd at the Linda Mars Aged Horse Care and Education Facility at the University of Kentucky. Right, Maggie McClendon (L) and Morgan Askins (R). Photos courtesy Dr. Amanda Adams.

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Equine (Rectal) Temperature Monitoring

An increase in body temperature can have several causes; fever due to infection is one of them.

During infection, inflammation-associated mediators are produced, which can shift the brain's set point, leading to an increase in body, or core, temperature. In horses, we can measure increases in body temperature using a rectal thermometer. Reliable alternatives are subcutaneously placed "thermal chips" that are measured with a reader, or nasogastric tube "smart pills" for continuous core temperature recording over time. However, nothing beats the rectal thermometer for its simplicity, availability and cost.

Digital thermometers have widely replaced mercury thermometers. Digital thermometers come in various types and brands and are both reasonably priced and affordable. Individual baseline (rectal) temperatures can differ between horse breeds and by age. Rectal temperatures in the same horse can fluctuate, typically by less than a degree with season or ambient temperature, and by 1, up to 2, degrees during the day. Naturally, measured temperatures are higher post-exercise than at rest. For horses, a cut-off for fever of a per rectum measured temperature is conservatively set at 101.5°F (or 38.6°C).

Not all horse owners know how to take temperatures, nor are thermometers always available. However, taking temperatures is one of the first steps if a horse appears listless, too quiet or anorexic. After the (Equid) (alpha)herpesvirus (EHV-1) Myeloencephalopathy outbreak at show grounds in Valencia, Spain, in 2021, daily taking temperatures (and reporting) became a mandatory task for participating parties. Requested by FEI during transportation to an event, at entry, but also during competitions, made this simple task an important early alert mechanism to prevent or mitigate disease outbreaks at competitions.

Recording changes in core temperatures in horses has been an intricate part of any clinical study. Our laboratory at the University of Kentucky recently concluded a live horse study with twice-daily body temperature recordings. We used digital thermometers for this part of the daily clinical exams. The thermometers we used were different brands of over-the-counter thermometers. Before their use, all thermometers were calibrated in the laboratory using a water-bath test at two preset temperatures: 37.0°C (98.6°F) and 39.2°C (102.6°F).

Part of this assessment is repeatability, where three consecutive readings performed in the *in vitro* experimental setup yielded very similar results. During our experiment, we followed a strict protocol of three consecutive readings while the thermometer remained inserted in the rectum of a horse. To our great surprise, the third reading was consistently the highest of the three. Differences between the first and third measurements became wider during the fever days of individual horses.

Furthermore, several of our horses are fitted with a thermal chip, and we were able to compare its readings with those from the thermometer. Our third measurement correlated best with the thermal chip reading.

Conclusions: Knowing a horse's body temperature is vital for its clinical assessment. While digital thermometer readings are typically easy to obtain, easy to read and have replaced mercury and glass thermometers in equine environments completely, they may need a more stringent "three-times-is-the-charm" approach than we previously thought.

We advise anyone taking rectal temperatures in horses with digital thermometers to repeat the measurement at least once with the thermometer still inserted in the rectum. If results diverge between the first and second measurements, a third measurement is indicated.

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Adobe Stock image.

Disaster Preparedness for Horse Farms

Since I was man,
Such sheets of fire, such bursts of horrid thunder,
Such groans of roaring wind and rain I never
Remember to have heard.
– King Lear, 3.2.47

Long before the sheets of fire and bursts of horrid thunder appear on the horizon, the savvy horse owner and farm manager can do much to protect lives and property. Damage wrought to the horse farm by disasters range from mild inconvenience to devastation. They may be slow and insidious (droughts, excessive rain); they may come with some advance warning (hurricanes, floods); or they may arise suddenly and move terrifyingly fast (wildfires, tornadoes). Everyone who owns or manages horses is aware of the need to prepare, but some of us may benefit from a seasonal reminder, and maybe a fresh approach, to prepare for what may come.

No single article can possibly address every scenario for every size farm and location, so this piece will focus on general principles. It is up to the reader to identify the greatest risks to their horses and businesses and prepare accordingly, starting TODAY!

Infrastructure: Basic changes in infrastructure can radically affect the susceptibility of a facility to a disaster. These take significant time and investment, but even small changes implemented over months to years are worthwhile. A few examples include:

- *Fire amelioration:* Maintain fire breaks, use fire-resistant materials in construction, clear brush and maintain access to water sources for fire fighters.
- *Flooding:* Identify and prepare high ground where animals can be temporarily enclosed and fed, improve drainage and divert water away from critical sites.
- *Storms:* Reinforce barns and shelters to be more wind-resistant, have a safe place for workers to shelter, remove trees that may damage structures and install and maintaini back-up power sources.
- *Drought, excessive rainfall or other potential disruptions in availability of feed and/or water:* Construction of adequate feed storage for buying in bulk when feed is available and identify alternative water sources (digging wells, trucked-in water, water storage).

Training: Do you or your staff know safe equine rescue techniques and how to care for traumatic injuries? These skills need to be developed well ahead of any need. For large operations in particular, running a mock disaster is highly illuminating of the holes in your disaster plan, which should include details like which responsibilities are assigned to specific people (e.g., who is evacuating horses from Barn A; who is clearing roads; and who is delivering feed/water, etc.), and where the resources are coming from (e.g., feed, trucks, fuel, etc.). As a bonus, mock drills help build trust and communication within the farm team.

Supply chain: As alluded to above, disruptions in the availability of essentials to the horse farm are common sequels to disasters, particularly if the event affects an entire region. Identifying reliable sources of feed, bedding, medication, fencing, etc. in and outside

https://www.wikiart.org/en/carle-vernet/rorses-frightened-by-the-storm-1800

the immediate region before a crisis is one less thing to manage in the moment. Create a current list of suppliers with redundancies built in and keep it up to date.

Insurance: When the premium payment comes due, review the policy with an agent to ensure nothing has inadvertently (or advertently) been dropped, and that changes in the farm (increased or decreased size or value, for example) are reflected in the coverage.

Relationships: By far the most important component of disaster preparedness is establishing relationships with the people who will help your horses and your farm survive, and to whom you can in turn provide help. For example:

- *Neighbors*: Particularly for small farms or backyard horse owners who may not have access to trailers, heavy equipment or plain old human-power, it is critical to develop a local network of people who you can call (or text) at a moment's notice. (Maybe host a Derby party or a trail ride!)
- *Local emergency responders:* Invite the local fire department to familiarize themselves with your layout and operation and solicit their input on how to improve.
- *Suppliers*: You've already identified your suppliers and potential back-ups, but occasionally also utilizing reliable purveyors of feed and equipment in and outside of your immediate region will improve the odds your needs will be a higher priority.
- *Veterinarian*: This should go without saying, but don't wait until a disaster – natural, medical or freak-accident – to have a working relationship with a veterinarian and their team. Incidence of diseases that may increase following disasters can be prevented with routine vaccinations – Botulinum, Tetanus and mosquito-borne viruses (West Nile, Eastern Encephalitis, etc.) Evacuation and the potential for co-mingling with horses from other farms pose many challenges to biosecurity, so keeping horses up to date on communicable disease vaccinations (e.g., EHV-1, Equine influenza) and having a current Coggins/EIA test are also warranted.

Put your plan into writing. No one will hold you to it, but the act of committing the time and effort of documenting your strategy and resources will go a long way toward protecting your horses, your farm and the people who work there.

Disaster planning resources for horse owners and farm managers:

- American Veterinary Medical Association: https://www.avma.org/resources-tools/pet-owners/emergency-care/large-animals-and-livestock-disasters
- American Association of Equine Practitioners: https://aaep.org/resource/disaster-preparedness/
- Farm Bureau AgBusiness Emergency Preparedness Tool: https://www.scfbins.com/articles/agribusiness-emergency-preparedness
- Farm Emergency Preparedness Templates: https://www.prep4agthreats.org/All-Hazard-Preparedness/farm-emergency-preparedness-plan
- Tips for conducting a disaster drill: https://titanhst.com/wp-content/uploads/2023/01/Tips-For-Conducting-a-Disaster-Drill.pdf

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Photo courtesy of UK Martin-Gatton College of Agriculture, Food and Environment.

Nocardioform Placentitis / Focal Mucoid Placentitis: Advancing Diagnostic and Therapeutic Frontiers

Nocardioform placentitis (NP)—now more descriptively referred to as Focal Mucoid Placentitis (FMP)—is a unique form of equine placentitis that remains one of the most enigmatic challenges for breeders and veterinarians. First identified in 1985, FMP has since occurred episodically with outbreaks in 1998, 1999, 2011, 2017 and 2020. The most recent surge in 2020 was reported in Central Kentucky and in the Mid-Atlantic region. Sporadic cases of FMP have also been reported in South Africa, Italy, Australia, Brazil and New Zealand.

Affected mares may suffer late-term abortions or give birth to small, weak, "stunted" foals due to placental insufficiency. These outcomes are not only devastating for breeders and owners but also impose a substantial economic burden on the equine industry. At the University of Kentucky's Equine Reproduction Laboratory, our research focuses on improving our understanding of and management for this disease by developing innovative diagnostic and therapeutic strategies.

The Enigmatic Disease
The route of infection for FMP remains one of the most significant mysteries surrounding the disease. Unlike ascending placentitis, which originates from ascending bacterial infection through the cervix, FMP is characterized by unique mucoid lesions typically located at the base of the uterine horns. These lesions are often covered in a thick, tan, mucoid material and are sharply demarcated from healthy tissue. How bacteria reach this site remains unknown.

The condition has been thought to be associated with soil-dwelling nocardioform bacteria such as *Crossiella equi* and *Amycolatopsis species*, though other non-nocardioform bacteria like *Mycobacterium species* and *Pantoea species* have also been isolated from clinical cases. Yet despite these associations, experimental attempts to induce the infection in mares by intrauterine inoculation of *Crossiella equi* at breeding and in pregnant mares via oral, intravenous and intranasal routes have been unsuccessful. Therefore, the pathogenesis of FMP remains obscure. What is clear, however, is that the environment plays a role. Outbreaks have repeatedly followed late summers characterized by unusually warm and dry conditions.

Advancing Diagnostic Frontiers
Detecting this condition at an early stage is crucial for effective treatment. While transabdominal ultrasound is a primary tool, it can miss early or small lesions because of the limited area that can be visualized in a large pregnant uterus. By the time overt clinical or imaging abnormalities are detected, the disease is already advanced, reducing treatment efficacy and increasing the risk of pregnancy loss.

To address this limitation, our laboratory is pioneering the use of blood-based proteomics—an advanced approach that enables comprehensive analysis of the circulating protein profile. Preliminary studies have identified a panel of proteins that is significantly altered in mares with FMP compared to healthy controls. We are currently expanding this work to verify and validate the most informative biomarkers, focusing on those with the highest sensitivity, specificity and diagnostic accuracy. The development of a reliable blood-based screening test would represent a major advancement, allowing veterinarians to identify at-risk mares earlier and with greater confidence. Earlier detection would, in turn, facilitate timely therapeutic intervention before the disease progresses, ultimately improving pregnancy outcomes.

Advancing Treatment Frontiers
Current treatment protocols are largely empirical, as it is not yet fully understood which medications effectively penetrate the thick mucoid material to reach the bacteria. New research efforts led by Dr. Rebecca Ruby at the UK Veterinary Diagnostic Laboratory are focusing on measuring antibiotic penetration and identifying which drugs best reach the target site. Furthermore, by utilizing high-resolution RNA sequencing, we at the Equine Reproduction Laboratory are investigating the genes involved in placental inflammation. Identifying these "on/off" switches for inflammation—specifically Toll-like receptors (TLRs)—may allow for the development of targeted therapies that complement existing anti-inflammatory and antimicrobial treatments.

How the Industry Can Help
Solving the mystery of FMP requires a partnership between researchers and the horse industry. The industry can contribute by: 1.) Sharing samples: Providing blood samples and submitting placentas from suspected cases to diagnostic laboratories for research, 2.) Maintaining detailed records: Accurate mare histories help researchers correlate disease patterns with potential risk factors, and 3.) Participating in surveys: Answering surveys helps map the geographical spread and identify commonalities among impacted farms.

Looking Ahead
While FMP remains a complex puzzle, our efforts to develop reliable diagnostic biomarkers and targeted therapeutics aim to fill critical gaps in the management of equine FMP. Our goal in the Equine Reproduction Laboratory is clear: to improve live foal rates and pregnancy outcomes for mares and reduce the substantial economic losses associated with this disease.

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International Report on Equine Infectious Diseases

This report collates information on equine infectious diseases provided by diagnostic laboratories in Lexington, Kentucky, the University of Kentucky Veterinary Diagnostic Laboratory (UKVDL) and Equine Diagnostic Solutions (EDS), Inc. We further included information from the International Thoroughbred Breeders Federation, the International Collating Centre (ICC) at the University of Cambridge, United Kingdom, and data from the American Association of Equine Practitioners' Equine Disease Communication Center (EquineDiseaseCC.org).

S. equi spp equi (Strangles) is the most consistently reported (infectious) disease of horses in the Western hemisphere. There has been sporadic Equine Influenza (EI) reporting throughout North America. However, EI reporting has been rather widespread throughout Europe including British Isles and Scandinavia. France is still the epicenter of heightened EI activity for the last two quarters in a row showing the volatility of this pathogen.

There has not been West Nile virus (WNV) or Eastern Equine Encephalitis virus (EEEV) reporting for this quarter. This is not surprising with a seasonal decrease in (transmitting) mosquito activities in (Northern Hemisphere) endemic areas. However, now is the time to vaccinate and booster immunity in horses. As a reminder, WNV and EEE vaccines are highly effective in preventing clinical disease, and cases in recent years (we reported!) were large in undervaccinated (meaning: not vaccinated in recent years) or unvaccinated animals.

Northern Hemisphere spring comes with foals, but also with foal diseases. In previous years, we reported high numbers of Rota virus A or B detection in foals with diarrhea born in the Eastern United States including the Central Kentucky area. This year, EDS in Lexington has not detected any positive samples (yet?) for either virus. We received a few reports on *Rhodococcus equi* and *Lawsonia intracellularis* in foals.

As Equid alphaherpesvirus 1 (EHV-1) abortions are more typically "last trimester" abortions, numbers have increased throughout the Northern Hemisphere. While reporting EHV-1 abortions through the EDCC website rarely occur (2026 Q1 – one case, North Dakota, U.S.), the UKVDL has performed nearly 150 exams on submitted aborted fetuses from (mostly) Kentucky or neighboring U.S. states. A total of 12 were attributed to EHV-1 pathogenesis. EHV-1 abortion numbers were reported from several laboratories in Europe. Interestingly, and for several decades now, central Europe also describes EHV-4 abortions. EHV-4 associated myeloencephalopathy ("neurologic herpes") is extremely rare and has been only once convincingly described (early 2000s). During this quarter, there is a convincing report on EHV-4 myelopathy from Germany. Q1 and Q2 in the Northern Hemisphere are also the heydays of EHV-1 myeloencephalopathy (EHM). For the first quarter, 11 EHM single case/smaller outbreaks have been described across North America, and 13 outbreaks across Europe, including the British Isles and Scandinavia. Most outbreaks were reported from privately owned or boarding/training facilities. There are two reports from EHV-1 outbreaks at veterinary (equine) clinics in continental Europe.

Sweden reported equid parapoxvirus (eqPPV) cases in horses causing a contagious pustulous dermatitis, mostly detected at the lower limbs of horses. We know of parapoxviruses as a cause of *Ecthyma*, soremouth or orf at lips or mammary glands of small ruminants. Case numbers in horses attributed to this equine variant have been low; however, transmission upon contact with lesions into humans has been described. Equid PPV has been first described in Finland in 2021.

New World Screwworm (NWS) infestations have been identified in northern Mexico close to the U.S. border. The condition is caused by NWS fly larvae (*Cochliomyia hominivorax*) which consume living tissue or flesh of warm-blooded animals, including horses. There has been a case of NWS infestation in a horse in a (Florida) quarantine facility imported from Argentina.

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Photo Courtesy Mark Pearson Photography.