TREATMENT OF EQUINE GASTRIC ULCERATIONS

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The analysis of the last literature confirms that multiple pharmacologic therapies have been suggested for the treatment of gastric ulcers. However, they can vary depending on the localization of ulceration area to provide maximum healing efficacy. Principal therapeutic options for ulcer treatment include H2 antagonists (cimetidine, ranitidine, famotidine, and nizatidine), proton pump inhibitors (PPIs; omeprazole, pantoprazole, rabeprazole, and esomeprazole), the mucosal adherent sucralfate.

It is known that the H2 antagonists suppress hydrochloric acid secretion through competitive inhibition of the parietal cell histamine receptor, consistently it increase gastric pH and resolving gastric lesions in both foals and adult horses.

The most efficient healing rate in the treatment of equine gastric ulcers provides Omeprazole it is proton pump inhibitor which blocks secretion of H+ at the parietal cell membrane by irreversibly binding to the H+, K+-ATPase proton pump. The powder form of omeprazole is rapidly degraded in an acidic environment, applying the enteric-coated capsule or a specially formulated paste is recommended to allow delivery of the active drug to the small intestine for absorption. An increase in gastric pH and a decrease in acid output are evident 5 to 8 hours after omeprazole paste administration. Healing rates (70%–80%) have recently been reported following omeprazole treatment for equine non-glandular gastric ulcers.

While using of Sucralfate is recommended for treatment glandular gastric ulcers, via stimulation of mucous secretion, enhanced prostaglandins synthesis, and concentration of growth factor at the site of ulceration. While using of Sucralfate combined with Omeprazole have positive treatment efficacy at glandular gastric ulcers – 67,5%. A

bacterial role in gastric ulcers has not been established therefore antimicrobial therapy is not recommended for treatment.

Preexercise versus postexercise administration did not have a significant effect on healing of equine gastric ulcers in a recent trial. The current recommended duration of therapy is minimum 4 weeks, followed by repeat gastroscopy, although most healing likely occurs within 21 days.