

Preface



Frank M. Andrews, DVM, MS
Guest Editor

According to the National Animal Health Monitoring System studies in 1998 and 2005, colic is the second leading cause of death in horses, second only to old age. Almost every equine practitioner deals with colicky horses on a daily basis. Unfortunately, the actual cause of a colic episode is found only in approximately half of these cases. This finding makes recommending preventive measures difficult and leaves the client frustrated, especially if the horse experiences recurring episodes. Furthermore, once colic is recognized, prognosis of that individual case is difficult, and giving the owner an idea regarding outcome is difficult. If surgery is required, post-operative complications (such as ileus, incisional infections, and diarrhea) may occur and can frustrate the most seasoned equine clinician. That being said, recovery from colic episodes is quite high, and in recent years, the equine clinician's ability to diagnose and treat horses with colic has improved dramatically. Recent advancements in diagnosis and treatment has led to this dramatic improvement in outcome and improved the health of horses with colic.

This issue, "New Perspectives in Equine Colic," provides the most recent information on pathogenesis, diagnosis, treatment, and prognosis of colic in horses. There is also information on development of a colic auditing system in which hospitals can monitor and assess outcomes and adjust procedures and techniques to improve recovery and survival rates. The stimulus for this issue came from the 2008 Colic Research Symposium held in Liverpool, England. Every 3 years, the Colic Research Symposium brings together leading researchers and clinicians from around the world to present and discuss the latest research and clinical information on colic and laminitis in horses. In-depth oral and poster presentations provide state-of-the-art information on colic and laminitis in horses. The meeting lasts for 3 days and results in an enormous body of information that could not be duplicated in this issue. Therefore, this issue captures only a small portion of the symposium, but it provides clinicians with essential information to diagnose and treat colic in horses. The authors do a wonderful job putting together well-referenced material that will help equine clinicians become better clinician-scientists, with the ultimate goal of helping the horse.

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Frank M. Andrews, DVM, MS
Equine Health Studies Program
Department of Veterinary Clinical Sciences
School of Veterinary Medicine
Louisiana State University
Skip Bertman Drive
Baton Rouge, LA 70803, USA

E-mail address:
fandrews@lsu.edu (F.M. Andrews)