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Integumentary Disorders Including Cutaneous Neoplasia in Older Horses

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KEYWORDS

- Skin Tumor Geriatric Dermatology Melanoma Carcinoma Pemphigus
- Sarcoidosis

KEY POINTS

- Older horses have few well-defined skin disorders apart from hypertrichosis/hirsutism associated with pituitary pars intermedia dysfunction and some neoplastic conditions.
- Several well-recognized diseases are known to show progressive deterioration in older horses; for example, insect-bite hypersensitivity.
- Tumors affecting older horses include melanoma and squamous cell carcinoma.
- Secondary skin disorders arising as a result of poor management or degrees of immunocompromise can present in older horses.

INTRODUCTION

The skin of the horse is a highly visible and accessible organ that can reflect the overall health status of the horse or be affected by primary or secondary diseases. In a disease survey of 200 geriatric horses (≥15 years of age) 71% had a dermatologic abnormality and 22% displayed hirsutism or abnormal shedding. Although the dermatologic abnormalities were not specifically identified/diagnosed, many were secondary bacterial, fungal, and parasitic infections (possibly related to degrees of immunocompromise) or neoplastic.¹ A recent pathologic study showed that in 4.2% the causes of death or euthanasia of animals more than 15 years of age were attributable to skin disease, including sarcoid, melanoma, lymphoma, and squamous cell carcinoma, and most of these were cutaneous.²

Several immune-mediated and autoimmune conditions affect older horses in particular but few of these are the preserve of older horses. Pemphigus foliaceus is probably the commonest autoimmune condition of horses and although the disease can affect horses of all ages, including the very young, it is generally regarded as being more serious from a prognostic perspective in older horses. Sarcoidosis (generalized

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Vet Clin Equine **■** (2016) **■**-**■** http://dx.doi.org/10.1016/j.cveq.2016.04.005

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granulomatous disease) is an immune-mediated generalized disease that often has prominent cutaneous signs and again this is probably more common in older horses. Management failures, often deriving from neglect and poor body condition, may result in immune compromise and consequent opportunistic primary skin infections and infestations, including viral, bacterial, fungal, and parasitic skin disease that would not normally affect the mature horse. Horses that develop unusual or opportunistic infections of the skin should probably be explored clinically for underlying immune-compromising disease.

Skin disease can result in significant morbidity and mortality in geriatric horses. Early detection of the more serious disorders of the skin could be instrumental in reducing the welfare implications of the conditions and improving the life span of affected horses. When examining an older horse for skin disease it is important to remember the basic division of the potential differential diagnoses. The broad categories of disease affecting older horses are shown in **Table 1**. Few skin conditions are the preserve of older horses but some are more associated with advancing age. Conditions that specifically affect the skin of older horses and donkeys include:

- Benign/natural graying and diffuse hair loss
- Pituitary pars intermedia dysfunction (PPID)

Table 1 Disease groups and the common primary and secondary skin disorders that particularly affect older horses			
	Group	Primary	Secondary
Noninfectious disease	Genetic	Loss of pigment/graying Mane and tail dystrophy	_
	Immune mediated	Alopecia areata Insect bite Hypersensitivity	Paraneoplastic pemphigus Paraneoplastic pruritus
		Pemphigus Sarcoidosis	raianeopiastic pruntus
	Endocrine	Pituitary pars intermedia dysfunction Thyroid dysfunction (hypoplasia)	Bacterial, fungal, parasitic infections are common
	Toxic	— (Hypopiasia)	Hepatocutaneous syndrome
	ldiopathic	Proliferative/verrucose pastern dermatitis	
Infectious disease	Virus Bacteria	Papilloma Pastern dermatitis	Papilloma Staphylococcal pyogranuloma and furunculosis
	Fungus Parasitic	— Chorioptes equi	Dermatophytosis Dermatophilosis
Neoplastic disease	Ectodermal tumors	Squamous cell carcinoma Melanoma	_
	Mesenchymal tumors	Sarcoid Mast cell tumor	_
	Blood cell tumors	Lymphoma Plasma cell myeloma	

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