



Habronemiasis - aka Summer Sores

Habronema is an infection caused by nematode larvae that is carried by flies. The adults are found in the stomach of the horse and the larvae are passed in the horse's feces. The larvae are ingested by houseflies or stable flies and then deposited on the horse while the flies are feeding. The larvae can cause lesions when they are deposited on the mucous membranes, conjunctiva, abraded skin, or in open wounds. The two most common types of Habronema infections are cutaneous and ocular lesions.

Habronema larvae tend to be deposited in areas of natural body moisture. Therefore, lesions are most commonly seen on the lips, prepuce, urethral process of the penis, medial canthus of the eye, conjunctiva, in the corner of the lips, and in any area where the skin has been traumatized. Habronemiasis is characterized by the rapid growth of papules, exuberant granulation tissue (proud flesh) and failure of a wound to heal. Lesions may be solitary or multiple. The lesions are typically characterized by ulcerations, exudate (pus), intermittent bleeding episodes, and pruritis (itching). Lesions often contain small yellow granules, which are dead or dying larvae.

Habronemiasis is believed to be a hypersensitivity reaction to the antigen of the dying or dead larvae. Habronemiasis is most frequently seen during the spring and summer, when fly populations are at their peak. Most lesions regress during winter. Diagnosis is often made on the basis of history, location of the lesion, the presence of yellow granules and other clinical signs that are mentioned in the above paragraph. A definitive diagnosis can and should be made by taking a biopsy of the lesion.

There have been many treatments of Habronemiasis reported but no single treatment is consistently successful. Treatment regimens for Habronemiasis should be made with 4 goals in mind: to reduce the size of the lesion, to reduce inflammation, elimination of adult Habronema from the stomach, and reduction of the fly vector populations. The most effective treatment regimens consist of a combination of local and systemic treatments. Larger lesions or lesions that do not heal with medical treatment should be surgically removed. Systemic and local treatments include: Orally administered Ivermectin; topical, intralesional and systemic corticosteroids; anti-inflammatory agents; and antimicrobial agents.

Habronema is sporadic but certain individuals are more susceptible. Prevention of Habronema can be attempted by using fly control: fly masks, fly sheets, fly spray, and immediate removal of feces from the area. Regular deworming with ivermectin, to eliminate adult Habronema from the stomach, can also help reduce the incidence of infection and reinfection. It is also important to wrap existing wounds to prevent reinfection.

Any lesions that fit the description given in the above paragraphs should be examined by a veterinarian. These lesions need to be differentiated from squamous cell carcinoma, pythiosis, fungal infections, bacterial granulomas and exuberant granulation tissue (proud flesh). Differentiation of these infections can lead to a more cost effective and clinically effective treatment regimen.

Contact Brandon Equine Medical Center at 813-643-7177 or email info@brandonequine.com with any questions regarding this topic.

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