EQUINE



CLIENT INFORMATION SHEET

Sarcoids

What are sarcoids?

Sarcoids are progressive skin tumours which typically remain localised to the superficial tissue. Although sarcoids may spread within the skin, they do not invade internal organs as other masses might. There are several different types which differ in appearance, however, the treatment methods remain similar regardless of type. Sarcoids can occur anywhere on the body but the most common sites include the head, legs, armpits, groin and under the abdomen. The risk for any individual horse developing sarcoids does vary depending on breed and genetic predisposition. The presence of wounds and flies have also been suggested as potential risk factors, highlighting the need for good fly control.

What are the treatment options for sarcoids?

Due to the many different types of sarcoid and the variable nature of the masses, there are several possible treatments. Each individual sarcoid must be evaluated prior to deciding on an appropriate treatment option:

Medical Treatments

- Electrochemotherapy
- Injectable chemotherapy drugs
- Topical chemotherapy cream
- Medications to stimulate the immune system

Surgical treatment:

Laser excision; this can be combined with the methods detailed above

What is the success rate of laser surgery?

Carbon dioxide laser excision of a single mass has a success rate of up to 85%. However, if you horse has more than 1 sarcoid, or if the sarcoid is present close to the eye or the ear, the likelihood of recurrence increases. In addition, certain types of sarcoid are less amenable to laser surgery than others.

Why is the surgeon proceeding with treatment without performing a biopsy first?

Sarcoids can typically be diagnosed on visual inspection and palpation; a biopsy is rarely necessary for diagnostic purposes. In addition, removal of part of a sarcoid (e.g. a biopsy) can sometimes result in the sarcoid growing quickly and aggressively. Once a sarcoid is surgically removed, the whole mass is submitted for histological evaluation. This will determine the type of sarcoid present, as well as the size of the surgical margins.

Will my horse need to be clipped?

The surgical site(s) will be clipped with sufficient margins to allow us to perform the procedure in a sterile manner. Some horses also require an intravenous catheter. If this is the case, a small area will be clipped on the side of the neck to allow the catheter to be placed under sterile conditions.



Does my horse need to be vaccinated for treatment of sarcoids?

Tetanus is an incredibly serious and often fatal condition which any horse undergoing surgery is at risk from. Your horse must be vaccinated for tetanus before treatment commences. If this is not possible prior to your appointment, your horse will receive a tetanus antitoxin.

How long will my horse be in hospital?

The length of hospitalisation can vary depending on the number and location of the sarcoids present. However, as a general rule, your horse will be evaluated the day of admission, undergo surgery the day after admission and will remain in hospital for 1-2 days post-operatively. In more complex cases, the duration of pre-operative evaluations and post-operative care may be longer. For some horses with a low number of masses that are in favourable locations, evaluation and surgery may be performed in a single day; please discuss this with your surgical team.

When will I receive updates on my horse's progress?

After your horse's initial evaluation, your resident or surgeon will contact you to discuss the findings and the proposed course of action. Please be advised that this conversation may take place when your horse is admitted, shortly afterwards, or we may contact you in the evening on the day your horse arrives. Any potential risks will be discussed with you at this time.

Please be advised that, due to our evaluations, your horse's treatment protocol may differ from our proposed plan prior to seeing your horse. Any changes will be discussed with you prior to proceeding with treatment.

You will be contacted after your horse's procedure has taken place and once daily, usually in the evening, throughout your horse's stay. Please be assured that if there are any complications with your horse's procedure, you will be contacted during the procedure itself.

Will my horse need a general anaesthetic?

Some horses admitted to the hospital for laser treatment of sarcoids will have a general anaesthetic. This will allow us to remove the mass accurately with appropriate tissue margins, while reducing the risk to surrounding structures. Particularly in the abdominal and thigh regions, a general anaesthetic often allows us to find additional small sarcoids.

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In some circumstances, the procedure can be performed under sedation and local anaesthesia. However, this is dependent on the location of the mass(es), the size of the mass(es), the number of masses, and your horse's tolerance for the procedure. The benefits and risks of a general anaesthesia or sedation will be discussed with you in detail prior to your horse's procedure.

Will my horse's surgical sites be sutured closed?

The surgical sites may be sutured closed if possible. With some surgical sites, due to the size of the mass, the tension on surrounding tissues and the movement in the area, suturing is not appropriate/



Due to the nature of laser surgery, it is not uncommon for the sites to become open; if this occurs, the area will still heal well but will take slightly longer

In some circumstances, non-absorbable suture (which requires removal after approximately 14 days) may be used; this will be detailed in your discharge instructions. If absorbable suture is used, your veterinarian may still choose to remove some or all sutures. Regardless of the suture type used, we recommend the surgical sites are evaluated by your veterinarian 1-2 weeks after discharge.

Do I need to clean the surgical sites?

If you horse has had chemotherapy, please do not clean the sites until advised to do so by your surgeon. This will be a minimum of 2 weeks.

For horses that have not had chemotherapy: due to the nature of laser surgery, some clear discharge is expected from the surgical sites. If there is any discharge and if your horse will allow it, clean around the surgery sites gently once daily with a salt solution (1 tsp of table salt in 1 pint of boiled, then cooled water) and gauze. However, if there is no discharge, or if your horse does not tolerate the procedure, please do not clean the areas. Please ensure you are in a safe environment with someone you trust holding your horse. Please wear gloves.

Can my horse be turned out at home?

This will depend on the number and location of sarcoids, as well as the time of year. Usually we recommend most horses remain on box rest for 2 weeks post-operatively/post-chemotherapy, however, this will vary depending on your horse's individual masses and treatment protocol. Please check with your clinical team as to when your horse can be turned out. In warmer times of year, please remember to have good fly control; this may include using a fly mask for sarcoids on the head.

Can my horse be exercised at home?

Usually we recommend most horses remain on box rest for 2 weeks post-operatively/post-chemotherapy, however, this will vary depending on your horse's individual masses and treatment protocol. Please check with your clinical team as to when your horse can be exercised.

What precautions will I need to take if my horse has had chemotherapy injections?

Your horse will remain in hospital during the most critical phase post-injection, however, please follow your discharge instructions carefully. Please observe the following general rules unless otherwise advised:

- Please do not allow children or anyone who is pregnant to handle your horse.
- Please wear chemotherapy gloves to handle your horse for 2 weeks after the last chemotherapy injection, unless advised otherwise.
- Please do not brush your horse until 2 weeks after the last chemotherapy injection.
- Please keep your horse on box rest.
- Please do not allow your horse to contact other horses.
- Please wear gloves to handle your horse's head collar, lead rope and rugs.
- Please do not exercise your horse for at least 2 weeks.
- Do no touch the mass or the clipped area around the mass, even while wearing gloves

When should my horse be re-evaluated?

Your horse should be evaluated 1-2 weeks after discharge to evaluate the surgical sites. Any sutures present are often absorbable but can removed 2 weeks post-operatively if desired. If the sutures are non-absorbable (this will be detailed in your discharge instructions), they can be removed 2 weeks post-operatively.



When will histology results be reported?

Following laser removal, up to 3 sarcoids will be submitted for histopathology (evaluation under a microscope) to determine the nature of the masses. These results can take approximately 1 week, or longer if the mass is particularly large or unusual in nature. We will contact you as soon as the results are available.

My horse is being admitted for a surgical procedure, when will this take place?

Your horse will typically have surgery the day after admission. However, for some smaller masses in favourable locations, the procedure may be performed the same day.

Will my horse be sent home with medications?

Your horse will usually be sent home with an oral antiinflammatory (usually phenylbutazone (bute)). Please do let us know if your horse does not eat, or has an adverse reaction to bute. Depending on the nature of the surgery, your horse may require post-operative antimicrobials.

As with all medications, if your horse becomes depressed, exhibits colic signs, has reduced appetite, or has a change in the frequency or consistency of their faeces, please discontinue the medication and contact your veterinarian.



What should I monitor for once my horse is home?

Please monitor your horse to ensure they are defaecating with a normal frequency and consistency. Monitor the catheter site (clipped patch on the neck) for any evidence of swelling, firmness, or discharge. In addition, please monitor the surgical sites for any discharge, especially if this is thick or purulent. While on medication, monitor your horse's demeanour, appetite and faecal output. Please call your vet in the first instance if there are any concerns.

