## Respiratory Pathology of the Horse

Minor resource www.ivis.org

### Pathology of Respiratory System

Upper Respiratory Tract
 Non infectious Disease
 Developmental Abnormalities
 Miscellaneous
 Neoplasia
 Infectious Disease
 Lower Respiratory Tract (Lung)
 Pleura and thoracic cavity

Noninfectious Disease of Upper Respiratory Tract – Nasal Cavity

Ethmoid hematoma Older horses ■ Cause of epistaxis Polyp like mass Nasal amyloidosis (amyloid AL) Multiple nodules Nasal and paranasal sinus cysts Neoplasia

### **Ethmoid Hematoma**

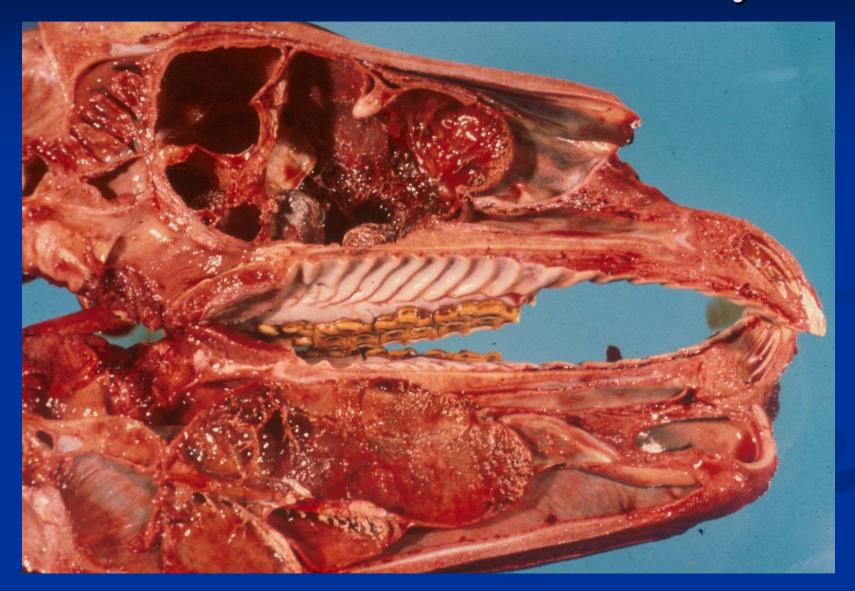


**Upper Respiratory Tract -Developmental Abnormalities** Nasal and paranasal sinus cysts Originate from dentigerous tissue Slowly growing and expansive ■ Result in cranial malformation Secondary infection possible DD neoplasia, tooth root abscess Surgical treatment possible

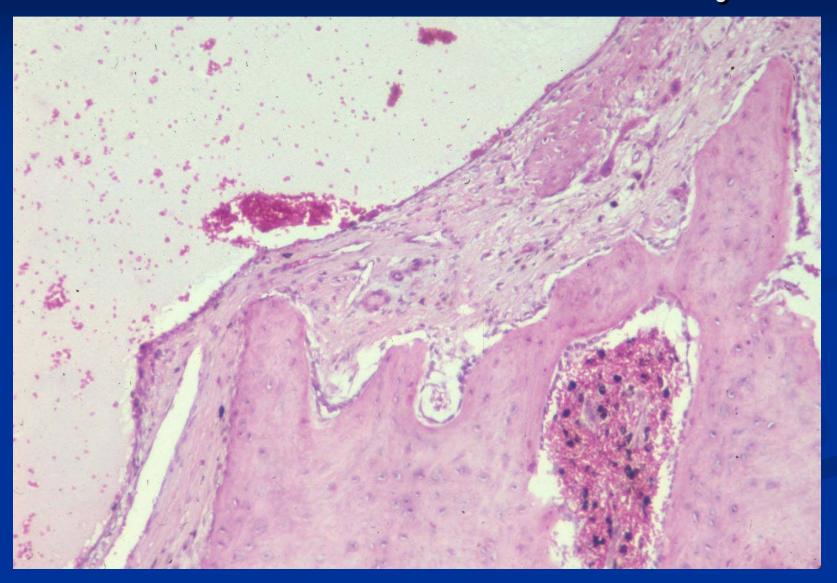
Nasal and Paranasal Sinus Cysts



### Nasal and Paranasal Sinus Cysts



### Nasal and Paranasal Sinus Cysts



### **Causes of Epistaxis**

- Exercise induced pulmonary hemorrhage (EIPH)
- Gutteral pouch mycoses
- Trauma
- Ethmoid hematoma
- Invasive intranasal lesion
  - Neoplasia

## Neoplasia of the Nasal Cavity: Clinical Signs

- Unilateral or bilateral mucoid or bloody discharge
- Intermittent sneezing
- Obstruction of nasolacrimal duct
- Facial swelling

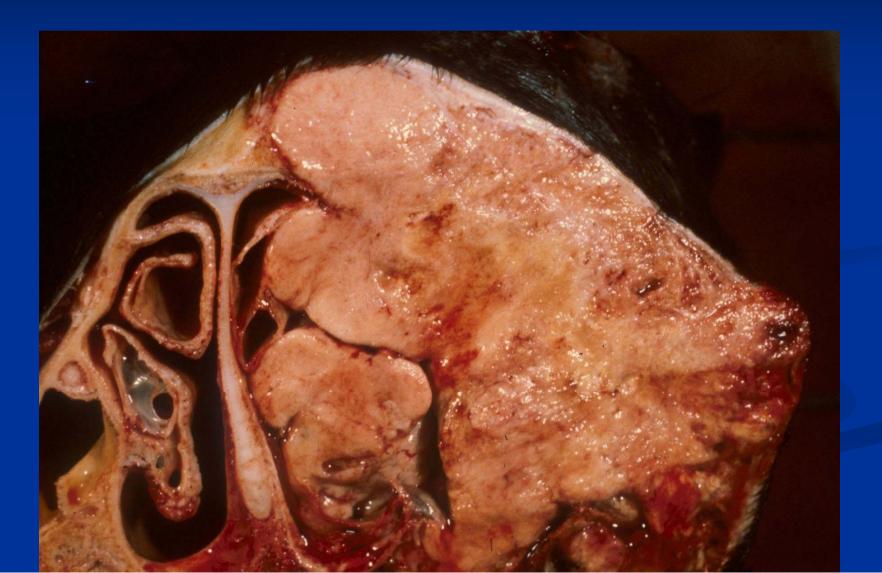
### Neoplasia of the Nasal Cavity: Clinical Signs



## Neoplasia of the Nasal Cavity Pathology

Origin Nasal passages Maxillary sinus **Tumor** types ■ Carcinoma ■ Sarcoma Sequella Bony erosion Extension e.g. through cribriform plate

### Neoplasia of the Nasal Cavity



Other Noninfectious Disease of Upper Respiratory Tract

Laryngeal paralysis
Idiopathic laryngeal hemiplegia ("roarer")
Epiglottic entrapment
Pharyngeal lymphoid hyperplasia
Laryngeal edema - traumatic
Smoke inhalation - thermal injury

## Idiopathic Laryngeal Hemiplegia (Roarer)

- Left recurrent laryngeal degeneration (axonopathy) with paralysis
- Left arytenoid cartilage immobile
- Left dorsal and lateral cricoarytenoideus muscle atrophy
- Cause unknown
- Results in incomplete dilation of larynx
- DD: secondary nerve damage (Wallerian degeneration) e.g. strangles, lymphosarcoma

Idiopathic Laryngeal Hemiplegia (Roarer) – note unilateral muscle atrophy



### Epiglottic entrapment

Reduced performance and obstructive respiratory disease

Epiglottal lesions
 Hypoplasia (congenital)
 Deformaties
 Cysts, etc

### Epiglottic Entrapment



### Equine Pharyngeal Lymphoid Hyperplasia

- 2-3 yr old race horses
- Partial upper respiratory obstruction
  White foci or occasionally nodules in pharynx
- Cause unknown, presumably excessive antigenic stimulation

### Upper Respiratory Tract -Infectious Disease



Equine viral rhinopneumonitis

- Equine Influenza
- Parainfluenza
- Adenovirus
- Rhinovirus

### Upper Respiratory Tract -Infectious Disease

Bacterial

Systemic diseases with prominent nasal discharge ■ Strangles ■ Glanders ■ Melioidosis Sinusitis secondary to sinus cysts, tooth root abscesses Mycotic Aspergillosis (gutteral pouch mycosis) Aquatic protistan parasite, class Mesosmycetozoa Rhinosporidium seebori (nasal polyps) – large sporangia containing endospores on histo

# *Rhinosporidium seebori* (nasal polyps)

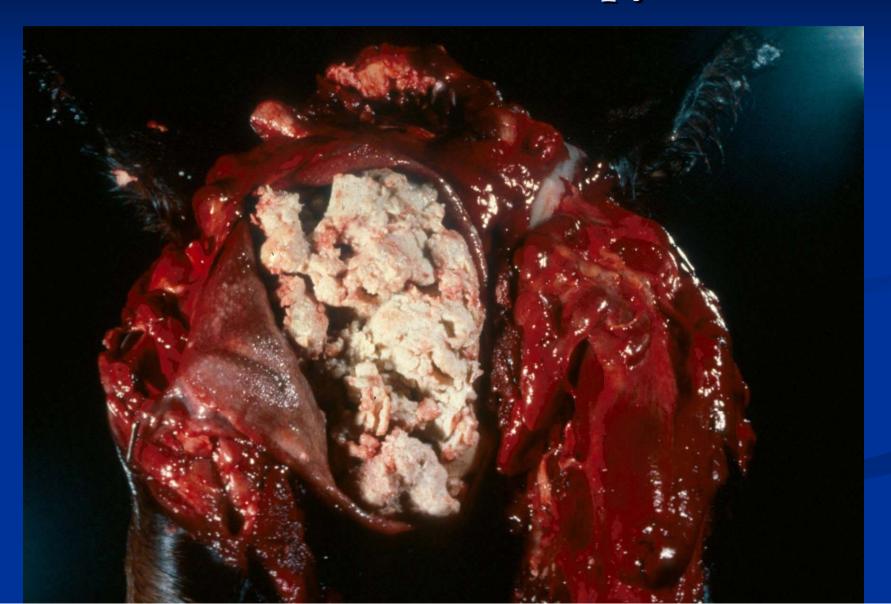


### Diseases of the Guttural Pouch

#### Bacterial

- Ventral
- Catarrhal/suppurative (empyema)
- Streptococcus equi (strangles)
- Mycotic
  - Dorsal
  - Granulomatous
  - Aspergillus spp.
- Tympany

### Guttural Pouch - Empyema



### Guttural Pouch – Hemorrhage Secondary to Mycotic Infection

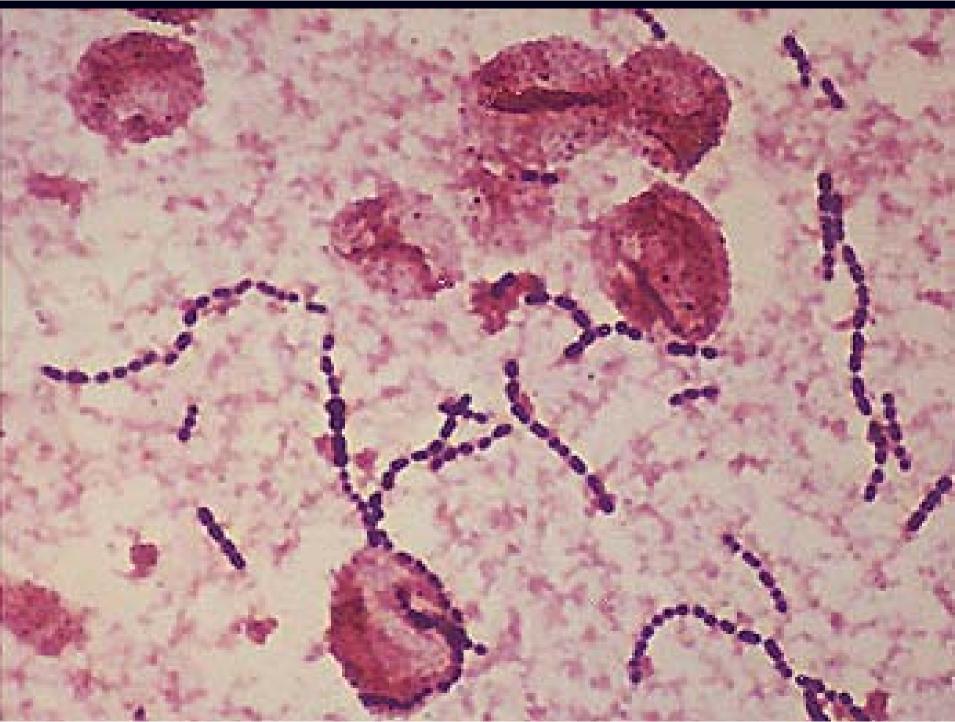


### Strangles

- Etiology: Streptococcus equi ssp equi
  - Not part of normal nasal flora
- Source infected feed, exudate or air droplets
- Worldwide occurrence
- Young horses under stress
- Acute contagious systemic disease
  - Fever
  - Purulent rhinitis
  - Cough
  - Enlarged lymph nodes

### Streptococcus equi subsp equi

*Strep. equi* is an obligate pathogen of Equidae  $\blacksquare$  Gram positive cocci,  $\beta$ -hemolytic, catalase negative, Lancefield group C ■ Virulence factors include ■ Hayluronic Acid Capsule Hides antigenic determinants from immune recognition Prevents phagacytosis



### Strangles

Upper respiratory disease Lymph nodes are infected and swollen Abscesses impinge on airway - obstruction Abscess rupture "Bastard" strangles complications





- Gutteral pouch empyema- uncommon
- Treatment includes drainage





Pathology
Purulent rhinitis
Lymphadenitis/abscesses
Regional
Systemic

### Strangles

Potential Sequella

- Guttural pouch empyema
- Internal dissemination "bastard" strangles
- Bronchopneumonia
- Facial paralysis and Horner's syndrome (sympathetic nerve)
- Laryngeal hemiplegia (recurrent laryngeal nerve)
- Purpura hemorrhagica (AbAg deposition)

### Glanders

- Etiology: Burkholderia mallei (Pseudomonas mallei)
- Source infected feed and water, rarely air droplets
- Eradicated except for North Africa, Asia, Eastern Europe, Brazil
- Zoonosis (potential bioterrorism agent)
- Contagious systemic disease
- Transmission to carnivores via ingestion of affected horses

### Glanders

### Pathology

- Nasal pyogranulomatous rhinitis that ulcerates
- Lung may see miliary granulomas due to hematogenous spread
- Skin (legs and ventral abomen)- may have suppurative lymphangitis ("equine farcy")

### Melioidosis (Pseudoglanders)

- Etiology: Burk.holderia pseudomallei (Pseudomonas pseudomallei)
- Source infected feed and water
- Associated with clay soils
- Southeast Asia, Europe, Northern Australia mainly
- Zoonosis (potential bioterrorism agent) Aboriginal communities
- Also in donkeys, goats, sheep and macropods
- Contagious systemic disease with wide host range including rodents

### Melioidosis (Pseudoglanders)

- Disease similar to glanders
- Pathology
  - Systemic
    - Suppuration and abscesses
    - Creamy to caseous, yellow to green
  - Lungs
    - Embolic bacterial pneumonia with abscesses
    - Ulceration of abscesses lead to pleuritis

#### Lower Respiratory Tract

Lungs
Non Infectious Diseases
Infectious Diseases
Neoplasia
Pleura and thoracic cavity

## Lung - Non Infectious Diseases

- Abnormalities of Inflation
  - Congenital atelectasis
  - Emphysema
    - Alveolar
    - Associated with COPD
- Metabolic Disease
  - Pulmonary mineralization ("calcinosis") toxicosis
- Circulatory Disease
  - Pulmonary hemorrhage (EIPH)
  - Pulmonary edema e.g. cardiogenic, anaphylaxis
- Aspiration pneumonia

## **Congenital Atelectasis**

- Alveoli incompletely distended
- Implies abortion or stillbirth
- Lung fails to float in formalin/water
- Lack of thrombosis in umbilical cord
- Can also occur following live birth
  - Aspiration of amniotic fluid and meconium
  - Surfactant abnormality "barker foals" see hyaline membrane (ARDS)

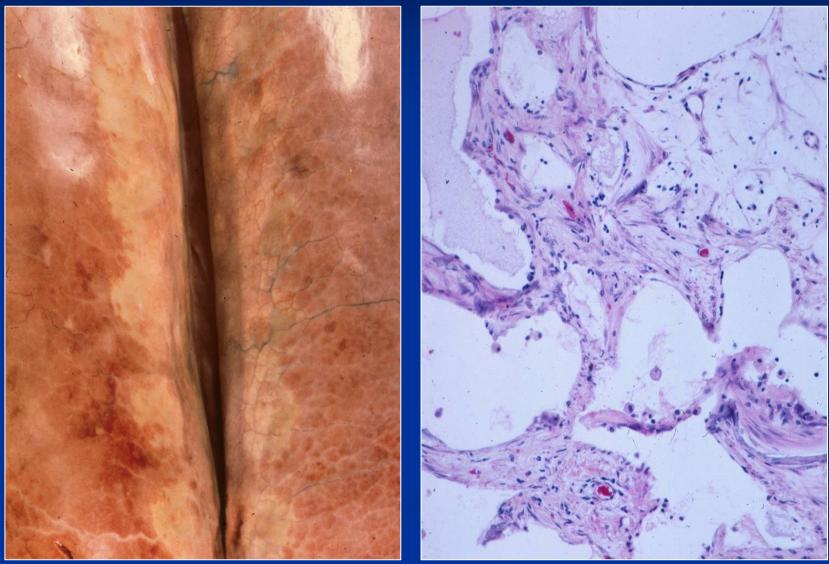
### **Pulmonary Mineralization**

Diffuse lesion ("pumice lung", "calcinosis")
Lung does not collapse, may be gritty
Capillary basement membranes mineralized
Other organs affected

### **Pulmonary Mineralization**

Etiology
 Hypervitaminosis D
 Calcinogenic plants
 *Solanum malacoxylon* ("Manchester wasting disease")
 *Cestrum diurnum*

### Vitamin D Toxicity – Horse Mineralization and fibrosis



# Exercise Induced Pulmonary Hemorrhage (EIPH)

Occurs after exercise in race horses worldwide
High incidence on bronchoscopy e.g. 80%
Clinically observed as epistaxis
Occasionally fatal
Possible cause – high pulmonary vascular pressure during racing, preexisting lung injury

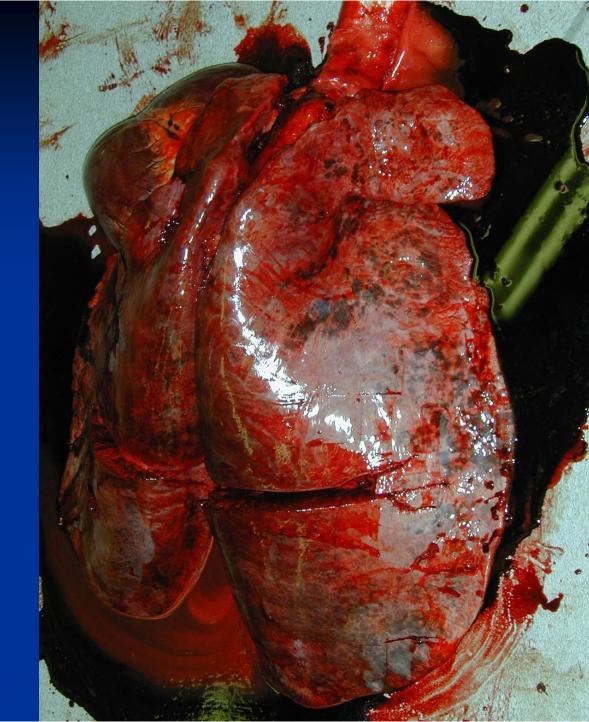
# Exercise Induced Pulmonary Hemorrhage (EIPH)

 May be difficult to make gross diagnosis due to autolysis

Discoloration of lung

 Histologically see alveolar hemorrhage, hemosiderosis, possibly fibrosis











# Pulmonary Edema

#### Cardiogenic

Toxicants ■ White snakeroot - *Eupatorium rugosum* Monensin/Rumensin ■ Avocado ■ Oleander, Japanese yew – generally die without lesions Anaphylaxis Penicillin, vaccination Smoke inhalation Differentiate from acute interstitial pneumonia e.g. Hendra virus, which may appear primarily as edema

## **Aspiration Pneumonia**

Etiology/predisposing factors
 Anesthesia
 Improper tubing (oil, medication)
 Prenatal stress – amniotic fluid and meconium
 Associated with syncytial cells in some cases

## Infectious Disease

#### Viral

Intersitial/bronchointerstitial pneumonia

#### Bacterial

- Bronchopneumonia
- Granulomatous pneumonia
- Mycotic
  - Intersitial to granulomatous pneumonia
- Parasitic
  - Granulomas
  - Eosinophilic bronchitis

## Viral Infectious Disease

- Generally mild and transient
- Stress, frequently related to racing
- Clinically indistinguishable
- Usually present as URT disease
- Suppress cell mediated immunity
- Predispose to infection
  - Bacterial, often from normal flora
  - Pneumocystis carinii

## Viral Infectious Diseases

#### Most important

- Equine viral rhinopneumonitis
- Equine influenza
- Equine viral arteritis (EVA)
- Hendra virus

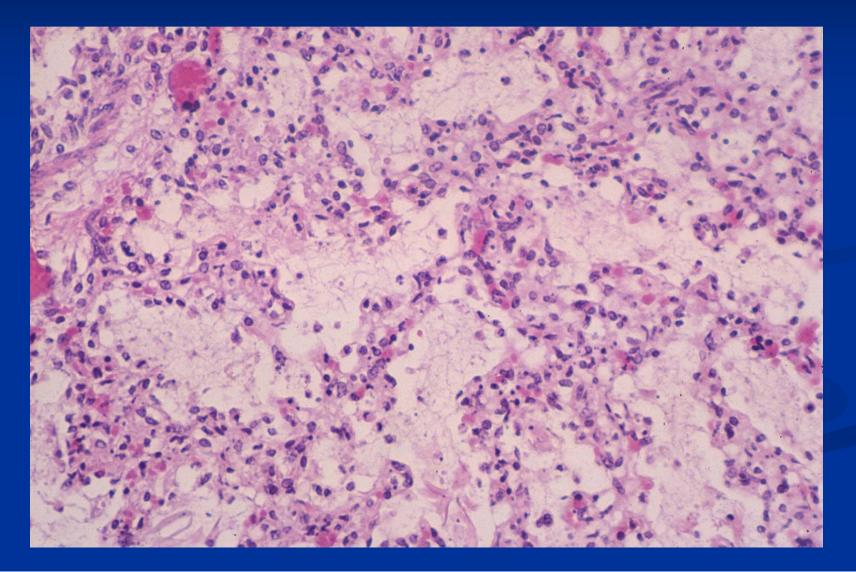
#### Other

- Adenovirus
- Parainfluenza
- Rhinovirus
- African horse sickness

# Equine Viral Rhinopneumonitis

- Equine herpesvirus 1 and 4 (EHV-1, EHV-4)Diseases
- Respiratory (generally EHV-4) ■ Weanling foals and young race horses Reproductive – abortions (generally EHV-1) ■ Fetuses/neonates infected in utero – severe disease - bronchointersitial pneumonia with necrosis and inclusion bodies Neurologic – recent racetrack outbreaks in USA Virus persists latently in trigeminal ganglia till activated by stress or immune suppression.

## Equine Viral Rhinopneumonitis – Fetal – Interstitial Pneumonia



#### Gamma-Herpes Virus in Donkeys

- Interstitial pneumonia
- Syncytial cells even in chronic lesion
- No inclusion bodies
- Kleiboeke et al, 2002, JVDI 14: 273-280

## Equine Influenza

Type A strain (A/equi-1 and A/equi-2) Generally in 2-3 yr olds at racetrack High morbidity, low mortality Clinical signs: fever, cough, oculonasal discharge Recently mutated and "jumped" to dogs

# Equine Influenza

- Pathology
  - Mucopurulent exudate in airways
  - Multifocal atelectasis (checkerboard pattern)
  - Broncho-interstitial pneumonia
  - Secondary bacterial anteroventral bronchopneumonia possible

#### Equine Viral Arteritis (EVA)

- Arterivirus found worldwide
- Disease pansystemic -foals and horses
- Virus infects macrophages and endothelial cells
- Clinical signs fever, respiratory distress, abortion, diarrhea, dependent edema

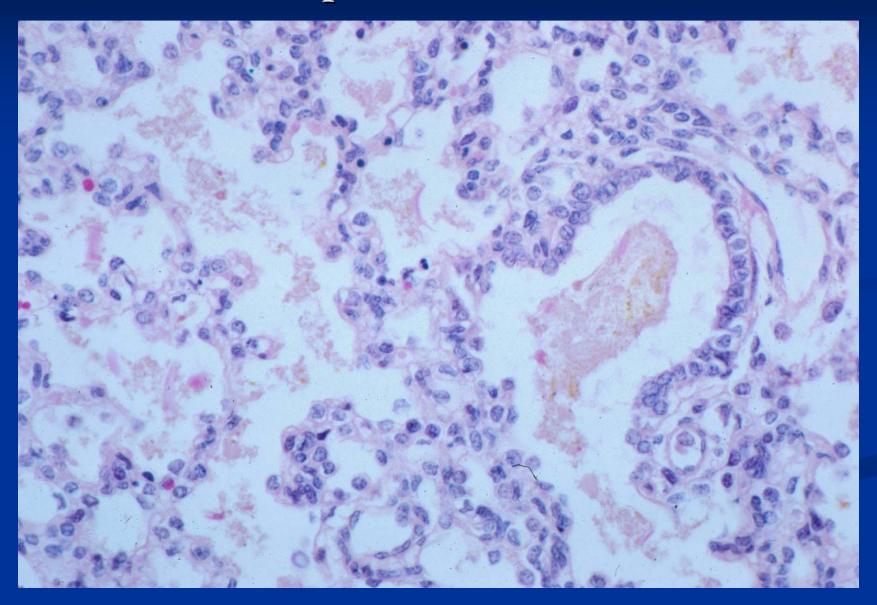
### Equine Viral Arteritis (EVA)

Pulmonary pathology
Interstitial pneumonia
Fibrino-necrotic vasculitis
Edema and hemorrhage
Hydrothorax
Other organ pathology related to vascular lesions

### Equine Viral Arteritis (EVA) – Fetus Interstitial pneumonia with rib impressions



### Equine Viral Arteritis (EVA) Mild interstitial pneumonia with meconium



## Adenovirus

Generally immunosuppressed/deficient foals e.g. Arabs with CID
Low morbidity, low mortality
Pathology
Bronchointerstial pneumonia

- Intranuclear inclusion bodies
- Often secondary infection bacterial, P. carinii

Adenovirus and *P. carinii* -Arabian Foal -Interstitial pneumonia



#### Hendra Virus

- Family Paramyxoviridae, subfamily Pneumovirinae, a henipavirus as is Nipah virus
- Transmission by fruit bats/flying foxes
- Zoonotic
- Australia
- Pathology
  - Severe pulmonary edema
  - Fibrinoid necrotizing vasculitis lung and kidney
  - Multinucleated syncytial cells endothelial cells
- Diagnosis IHC

### African Horse Sickness

- Orbivirus, vector borne (Culicoides)
- Africa, Middle East, India, Pakistan
- High mortality (up to 95%)
- **Forms** 
  - Pulmonary, cardiac, mixed and mild
- Virus infects endothelial cells

## African Horse Sickness

#### Pulmonary form

Severe respiratory distress and rapid death

Massive pulmonary edema

Cardiac form

Cardiac failure with head edema

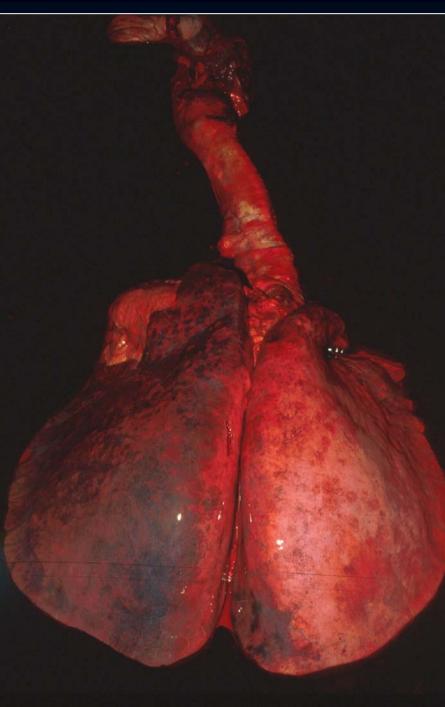
Diagnosis – IHC

## **African Horse Sickness**



# African Horse Fever





## **Bacterial Bronchopneumonia**

- Generally young, stressed animals
- Predisposition
  - Stress e.g. shipping
  - Viral infection
  - Immune deficiency/suppression

# Bronchopneumonia

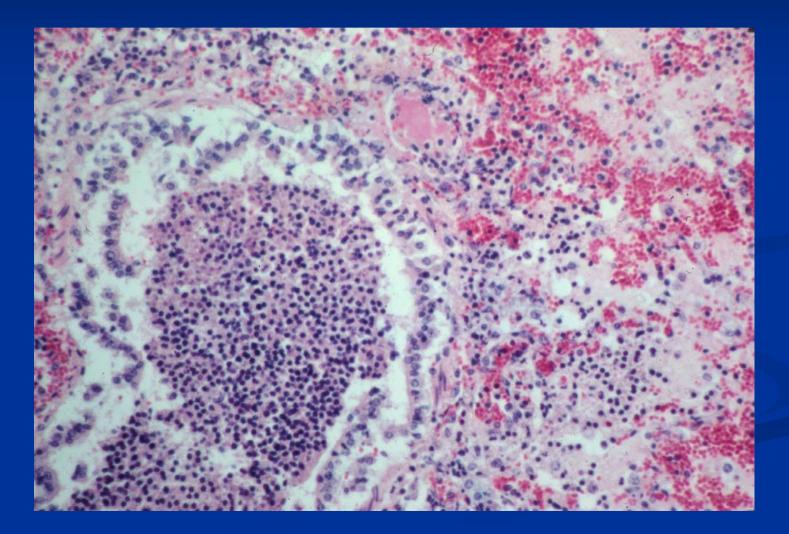
#### Etiology

- Rhodococcus equi (Corynebacterium equi)
- Other
  - Chlamydophila
  - Mycobacterium spp
- Opportunistic infections
  - Streptococcus spp
  - Strep zooepidemicus shipping fever
  - E. coli
  - Klebsiella pneumoniae

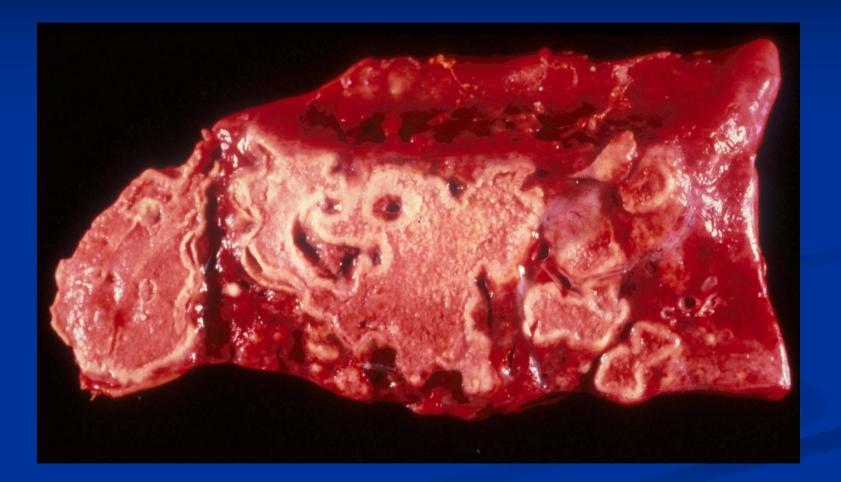
# Bronchopneumonia

- Common sequelae
  - Pleuritis
  - Abscesses
  - Sequestra

# Bronchopneumonia



### Sequestra Post Bronchopneumonia



# Pulmonary Abscesses



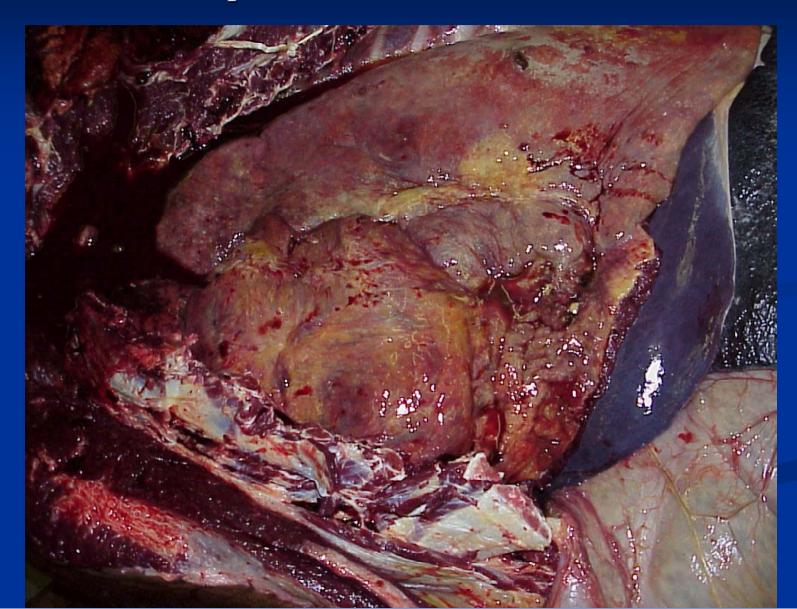
- Facultative intracellular Gram positive organism
  - Plasmid encoded virulence factors
  - Survives in macrophages
- Important worldwide cause of morbidity and mortality
- Enzootic on farms soil and feces
- Primarily affects
  - Foals 1-6 month
  - Older immunosuppressed horses

- Disease sporadic
  - Respiratory always
  - Enteric ulcerative enterocolitis sometimes
  - Disseminated occasionally
- Pathogenesis aerogenous, infected sputum to intestines (?)

#### Pulmonary pathology

- Acute anteroventral suppurative bronchopneumonia followed by
- Abscesses progress to pyogranulomatous pneumonia with caseous necrosis
- Chronic large coalescing caseous masses surrounded by fibrous tissue

### **Rhodococcus equi –** Bronchopneumonia with abscesses



#### Bronchopneumonia with abscesses



#### Bronchopneumonia with abscesses



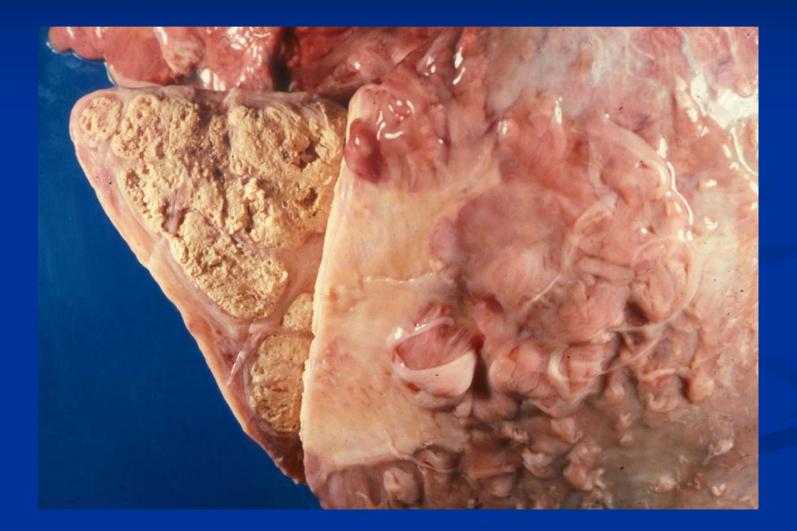
## Mycobacteriosis

- Mycobacterium bovis, tuberculosis and avium complex
- Ingestion followed by hematogenous dissemination
- Pulmonary granulomas without calcification or necrosis

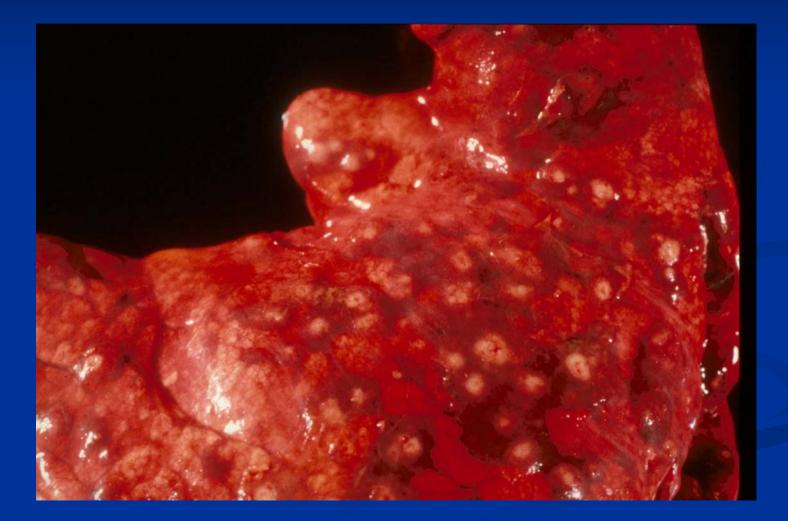
### **Mycobacteriosis** Pulmonary granuloma with chronic pleuritis

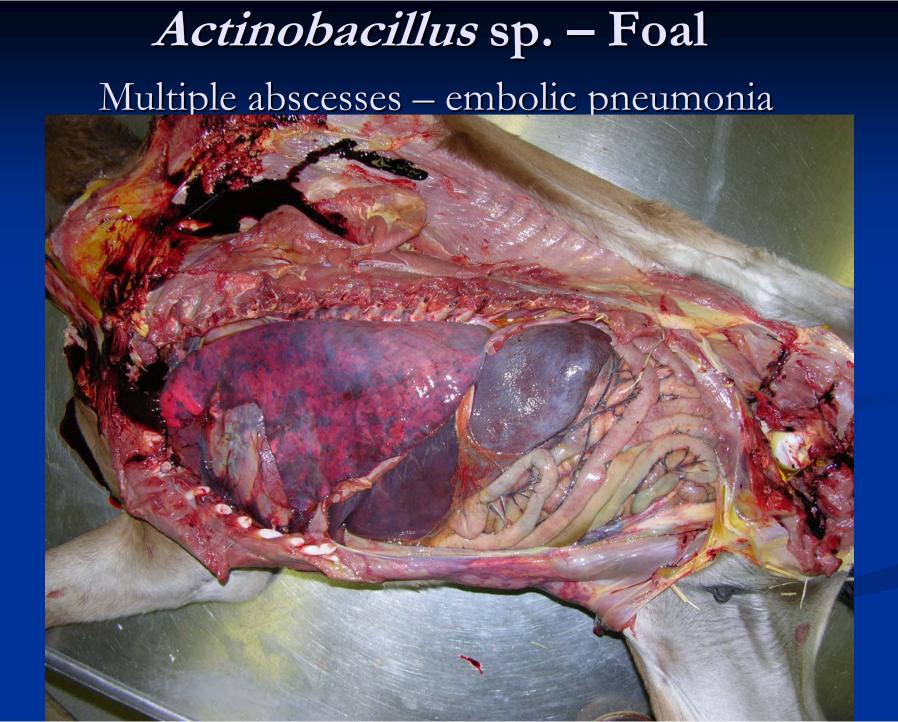


## **Mycobacteriosis** Pulmonary granuloma with chronic pleuritis

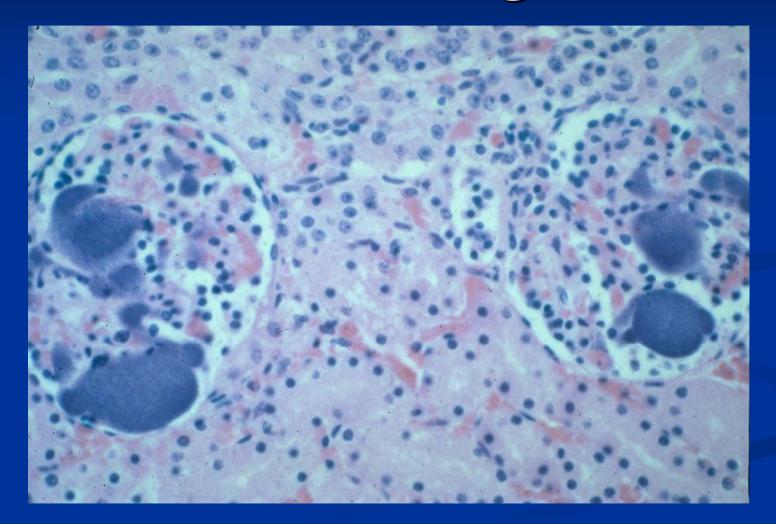


### **Embolic Pneumonia** Multiple abscesses





## Actinobacillus sp—Foal Kidney Embolic shower to glomeruli



## Mycotic Pneumonia

#### Pneumocystosis

■ Pneumocystis carinii (GMS stain)

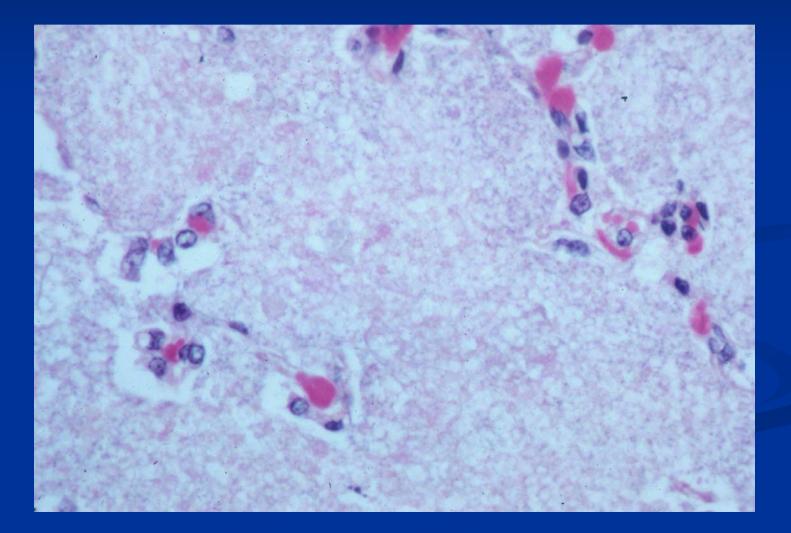
- Immunosuppressed, such as CID foals, often with adenovirus
- Organisms pack alveoli with foamy appearance
- *Cryptococcosis neoformans* (mucicarmine stain)

Pneumocystosis – Arabian Foal

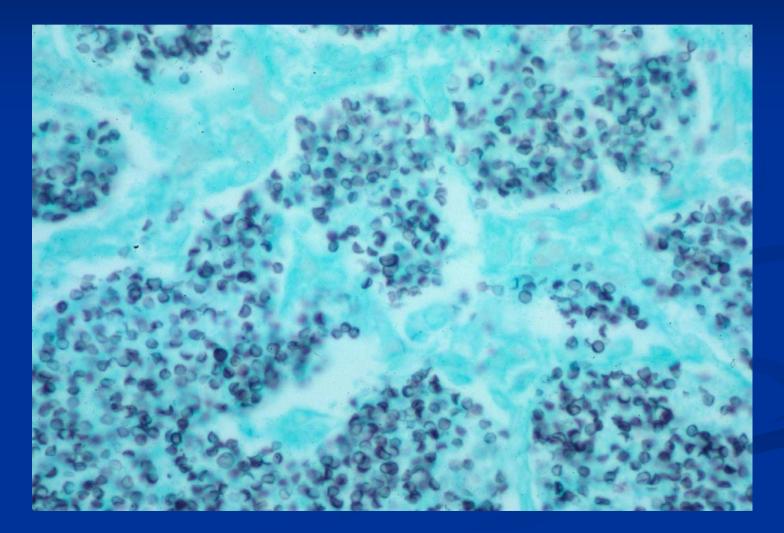
Interstitial pneumonia



#### **Pneumocystosis** Granular material in alveoli



## Pneumocystosis Silver Stain (GMS)



### Parasitic Pneumonia

#### Parascarus equorum

- Larvae migrate causing necrosis
- Dead larvae induce granulomas
- Associated eosinophils

#### Dictyocaulus arnfeldi

- Donkeys are natural hosts
- Non-febrile coughing horse
- Dorsocaudal lung
- Eosinophilic bronchitis, focal atelectasis

# Parascarus equorum

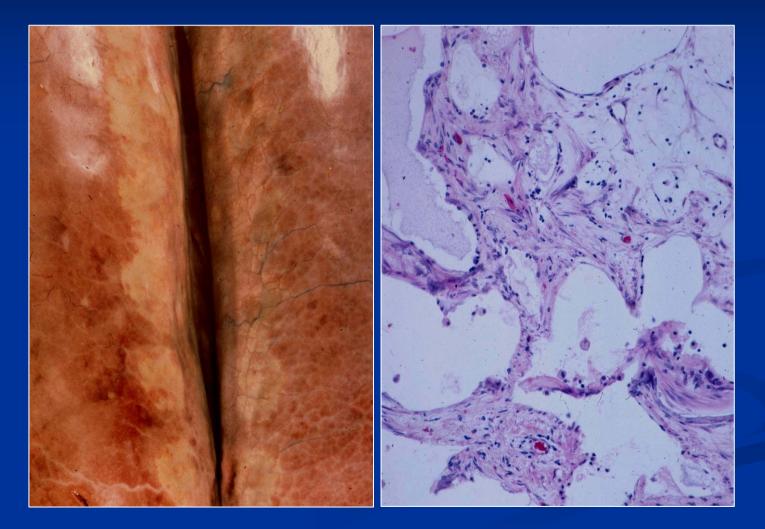


# **Toxic Injury**

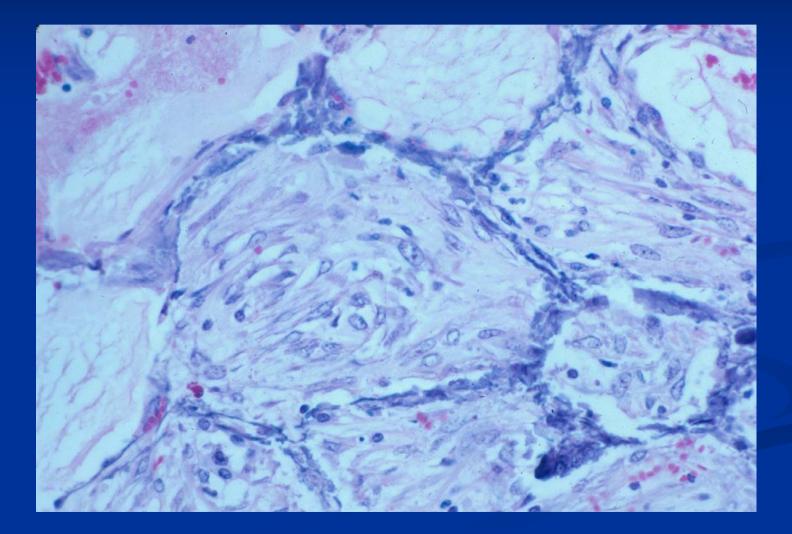
#### Mineralization

- Uremia—fibrosis
- Hypervitaminosis D
- Edema
  - Smoke inhalation chemical injury
- Granulomatous pneumonia
  - Silicosis
- Interstitial pneumonia
  - Plant toxins

#### Vitamin D Toxicity – Horse Mineralization and fibrosis



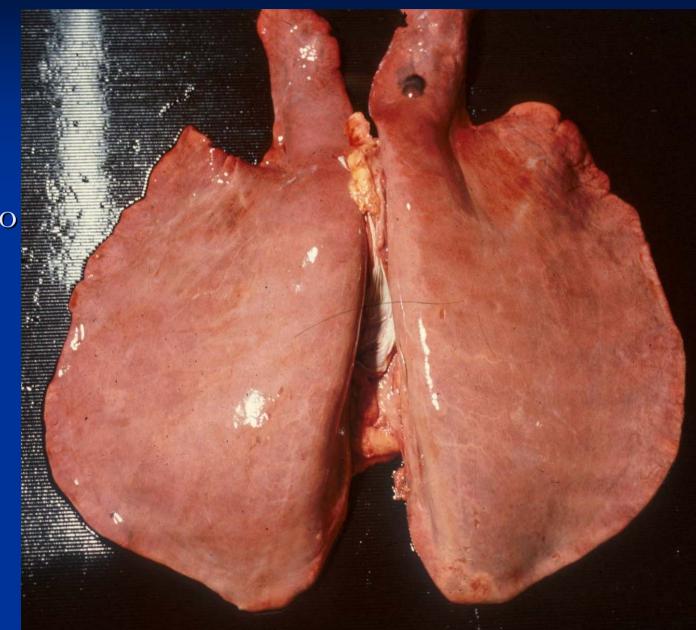
## **Uremia – Horse** Mineralization and fibrosis



## **Plant Toxins**

Crofton weed, *Eupatorium adenophorum* Acute or chronic interstitial disease Pyrrolizidine alkaloids – while most cause hepatic injury some can cause pulmonary injury Plants: Crotalaria spp, Senecio spp ■ Edema, hemorrhage, inflammation Epithelial proliferation/megalocytosis ■ Interstitial fibrosis Perilla frutescens ketone Interstitial pneumonia

### Plant Toxins – Interstitial pneumonia due to pyrrolizidine alkaloids



## **Smoke Inhalation**

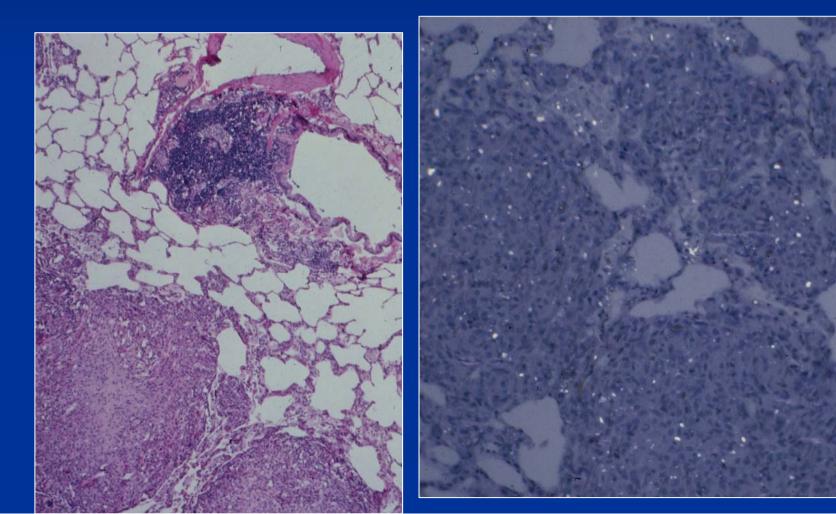
Injury due to
Thermal injury (URT)
Chemical injury (LRT)
Lesions
Langeal/tracheal necrosis with fibrin
Pulmonary edema
Often find carbon (soot) particles

## Silicosis

- Origin: mines, sandblasting, sand flouncing, soil
- Reported from California in horses fed off the ground following removal of top soil
- Pathology
  - Progressive granulomatous disease
  - Look for refractile silica particles
- Pathogenesis: cytotoxicity to macrophages

#### Silicosis

Experimental in rats – note granulomas and refractile silica particles (right)



## **Disease of Unknown Etiology**

- Acute interstitial pneumonia of foals (Angela Begg)
  - 3-6 mths, generally found dead
  - Hyaline membranes, type II cell proliferation
  - Clinical treatment with steroids
- Multisystemic eosinophilic epitheliotropic disease (MEED)

# Multisystemic Eosinophilic Epitheliotropic Disease (MEED)

- Chronic history of respiratory distress with weight loss
  Primarily in young horses, 3 -17 yr old
- Eosinophilic and lymphoplasmacytic infiltrates and eosinophilic granulomas
- In multiple organs including lung, skin, pancreas, salivary gland, GI and biliary and bronchial epithelium
- Similar syndrome in humans, dogs, cats and ferrets
- Etiology not known

# Immune-Mediated Diseases -Anaphylaxis

- Type I hypersensitivity
- Etiology
  - Iatrogenic: antibiotic injection, vaccination
- Pathology
  - Pulmonary edema with eosinophils
  - Airway constriction

Equine Allergic Pneumonitis/Chronic Obstructive Pulmonary Disease (COPD)

Hyperreactive airways and genetics have role

- Major disease of stabled horses (heaves)
- Type I and III hypersensitivity to allergens (fungal from hay, choock manure, etc)
- Cough, dyspnea, wheezing (expiratory)
- Pathogenesis: bronchitis/bronchiolitis leads to alveolar emphysema

# COPD – Emphysema - Horse



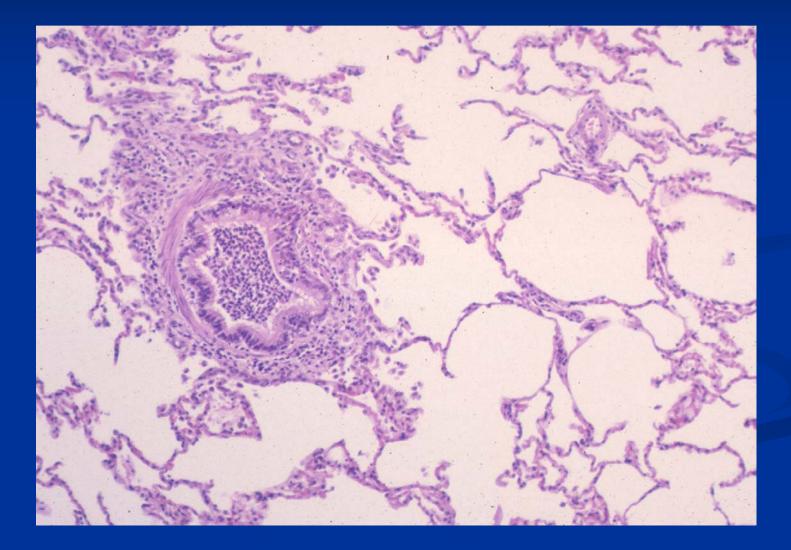
# COPD – Emphysema - Horse



## Mucoid Bronchiolitis in COPD



# Mucoid Bronchiolitis and Emphysema in COPD



# Neoplasia

- Primary rare
- Secondary metastatic includes
  - Melanosarcoma
  - Lymphosarcoma

# Lymphosarcoma



## Pleuritis/Pyothorax

Primary
 Bacterial e.g. *Nocardia asteroides* and *brasiliensis* – sulfur granules
 Secondary
 Extension of pneumonia
 Ruptured lung abscess – quite common