EQUINE INTESTINAL PATHOLOGY

Fabio Del Piero
University of Pennsylvania

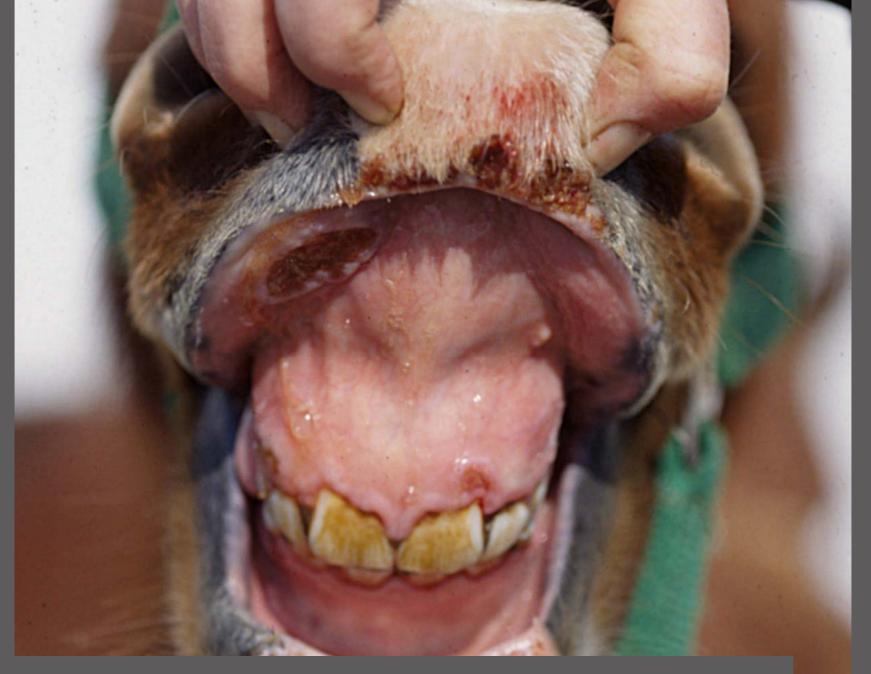
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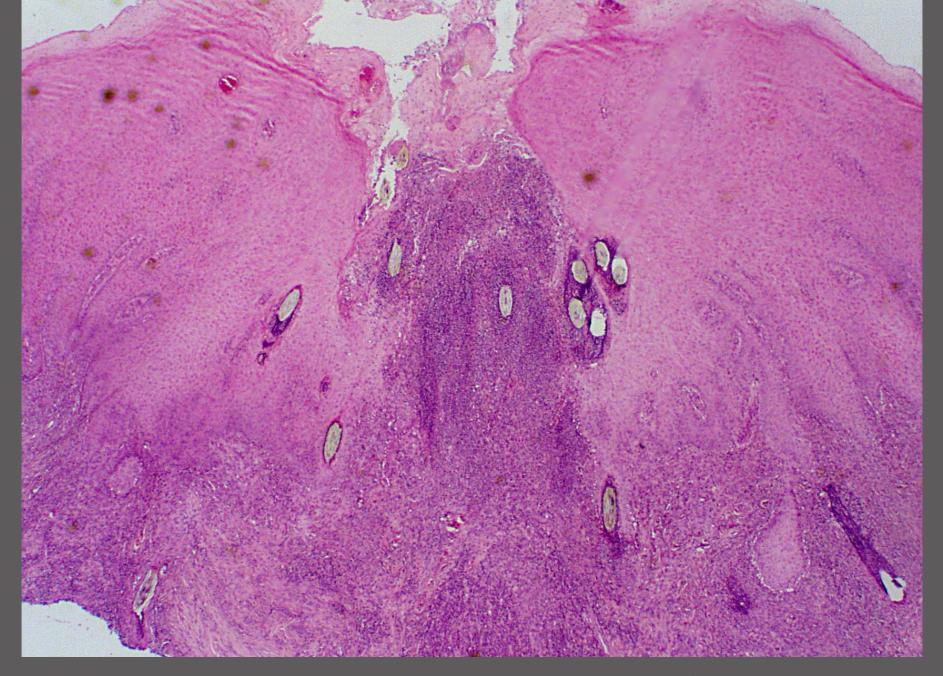




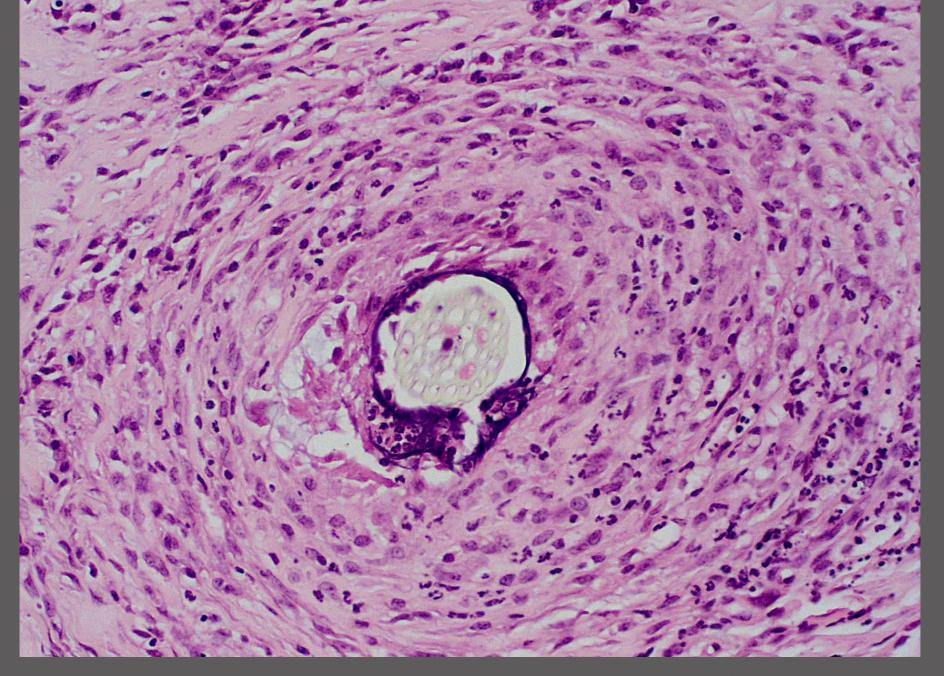
Coronary band dermatitis – Vesicular stomatitis rhabdovirus



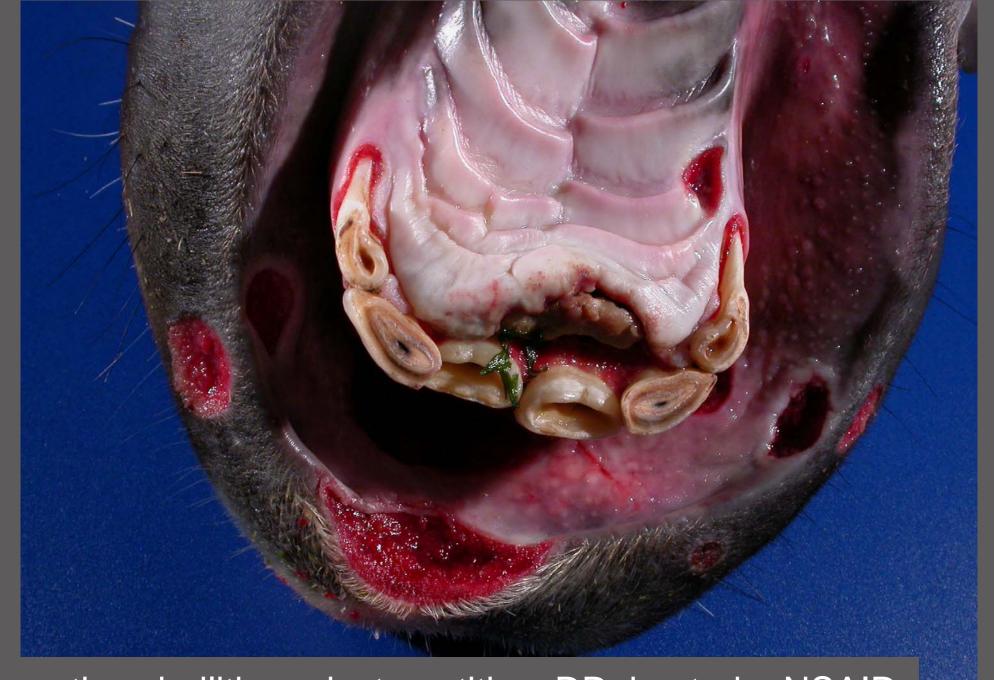
Ulcerative cheilitis and stomatitis – Setaria lutescens



Ulcerative and pyogranulomatous stomatitis – Setaria lutescens



Ulcerative and pyogranulomatous stomatitis – Setaria lutescens



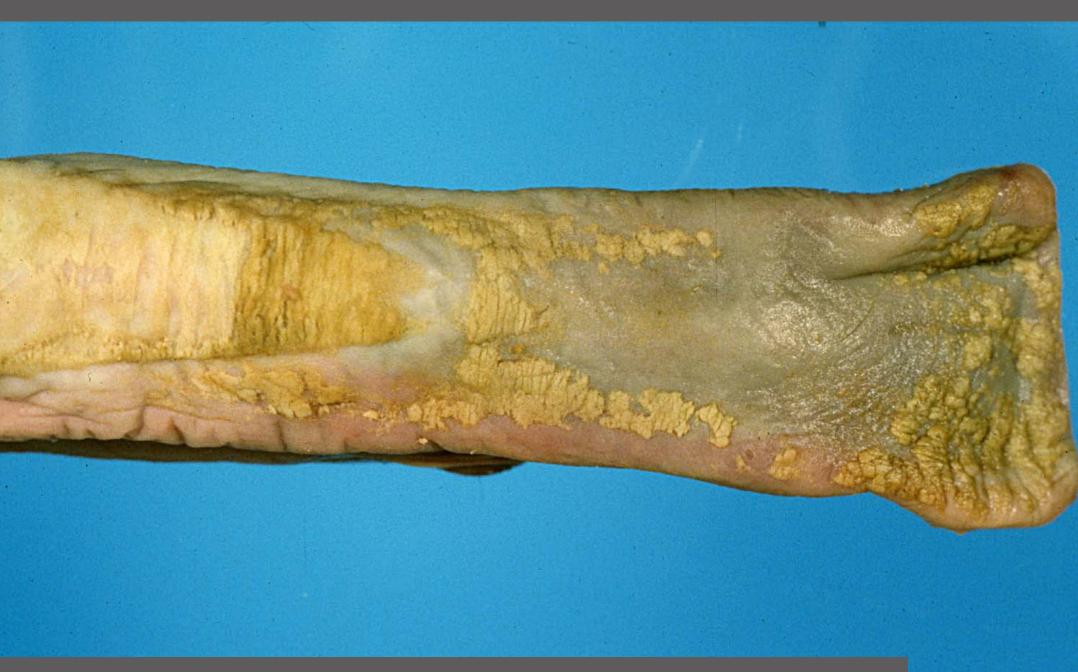
Ulcerative cheilitis and stomatitis - DD: bacteria, NSAID



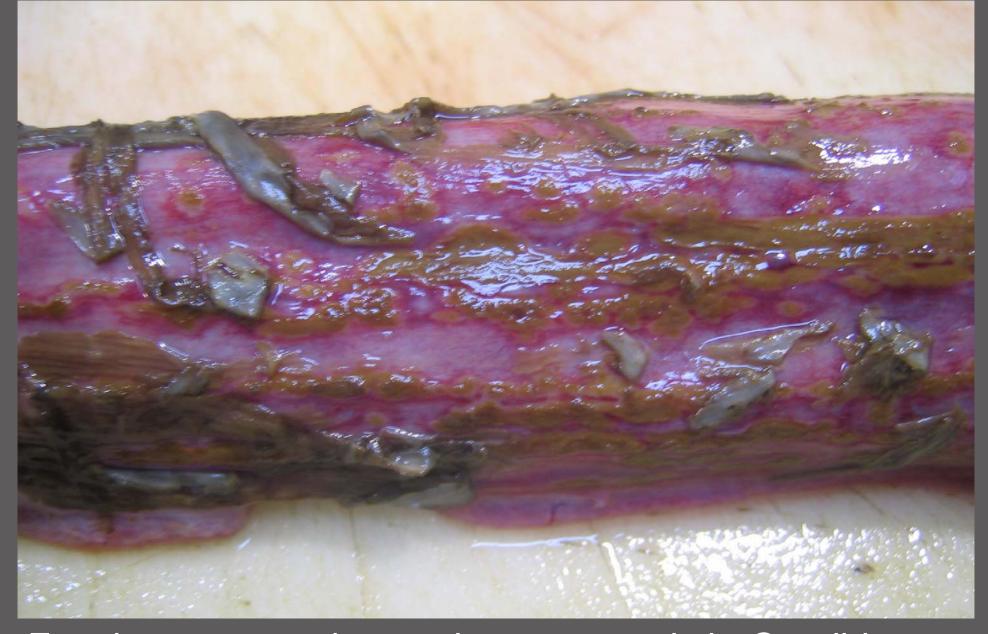


Oral cavity – hemorrhagic necrosis – purpura hemorrhagica – DD: EVA

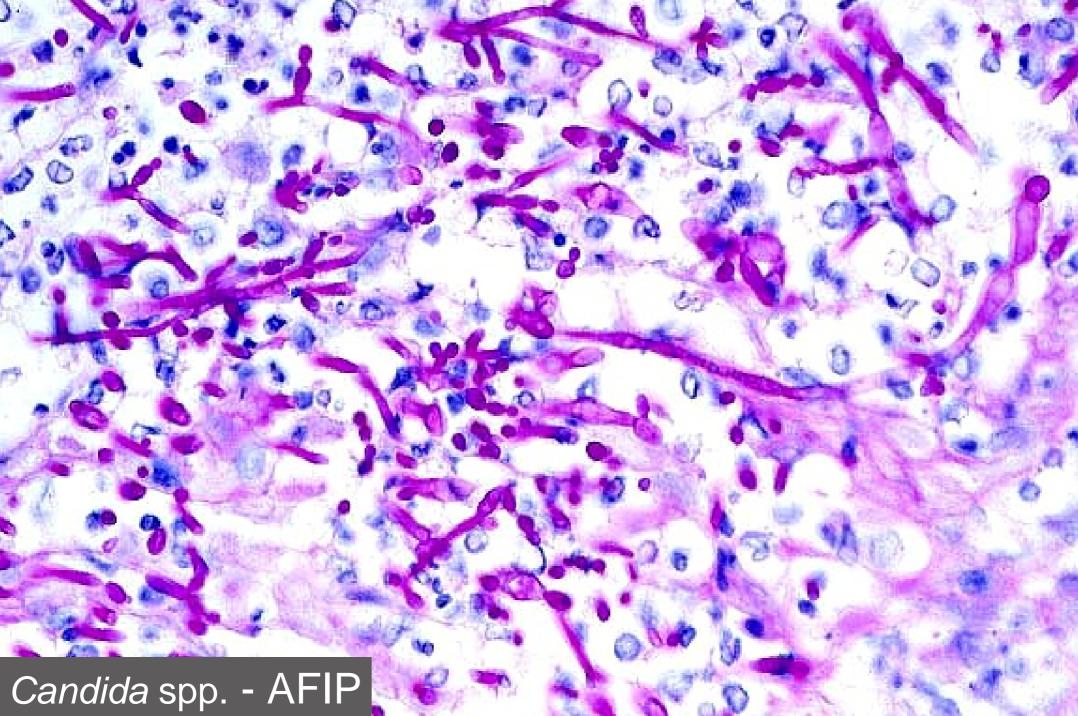




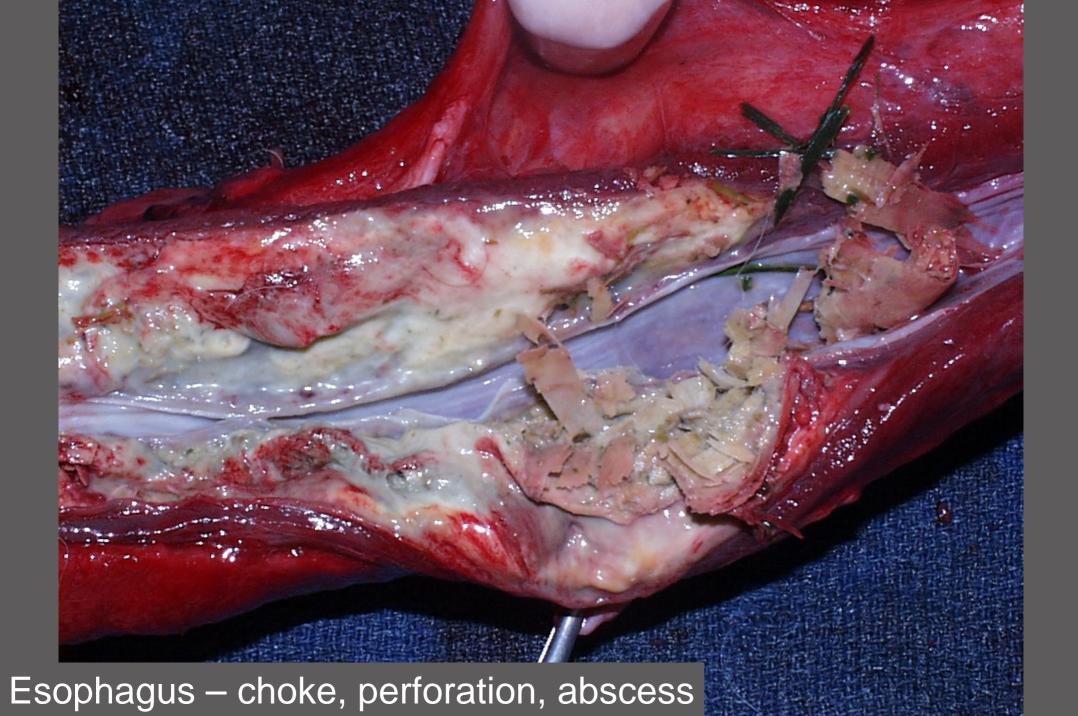
Tongue – parakeratosis – opportunistic *Candida* spp.

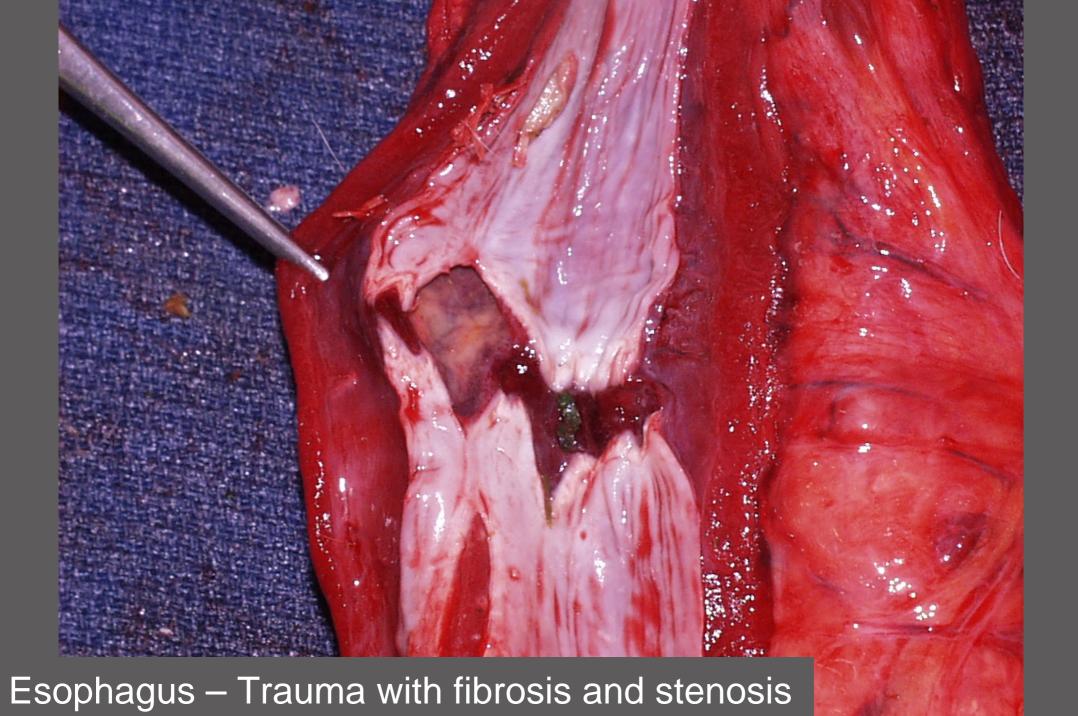


Esophagus – parakeratosis – opportunistic *Candida* spp. in foal with systemic salmonellosis







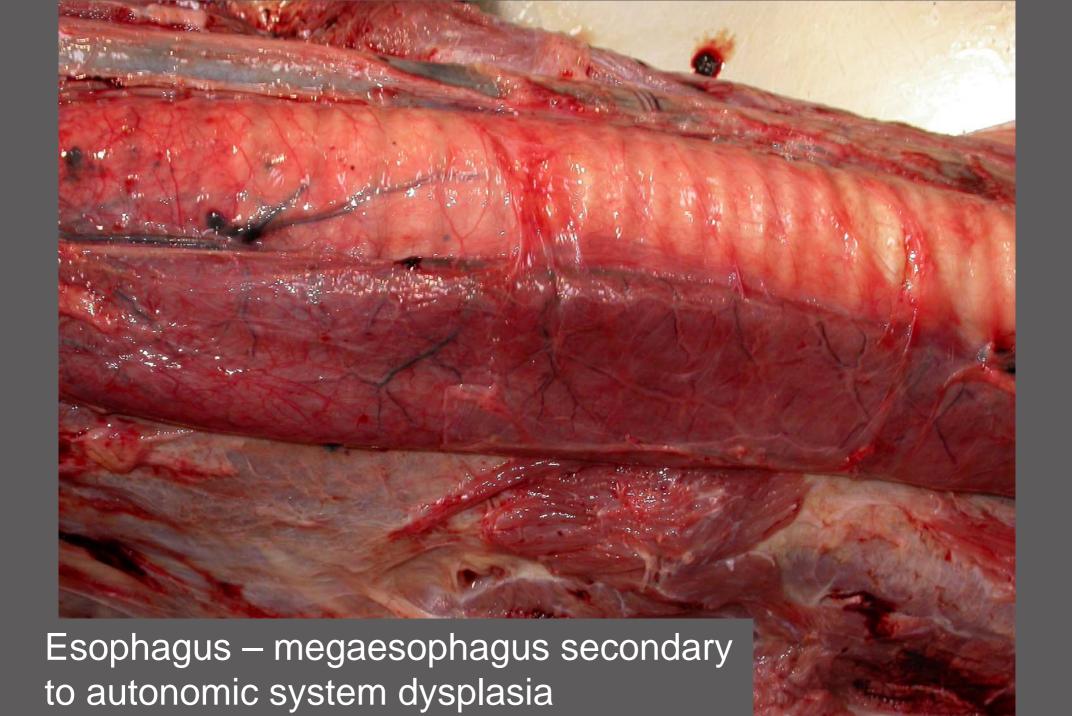


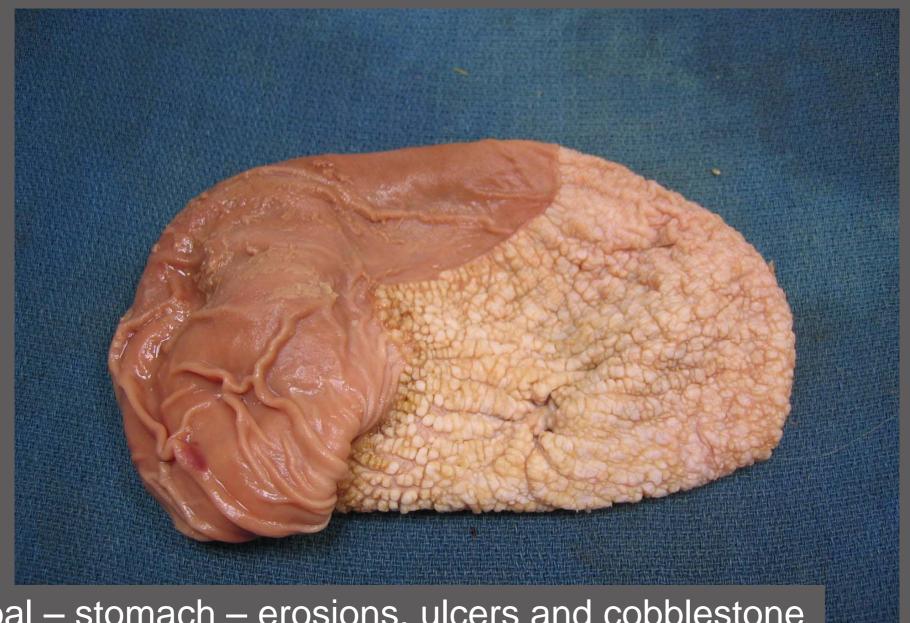


Esophagus – idiopathic hypertrophy of the distal part

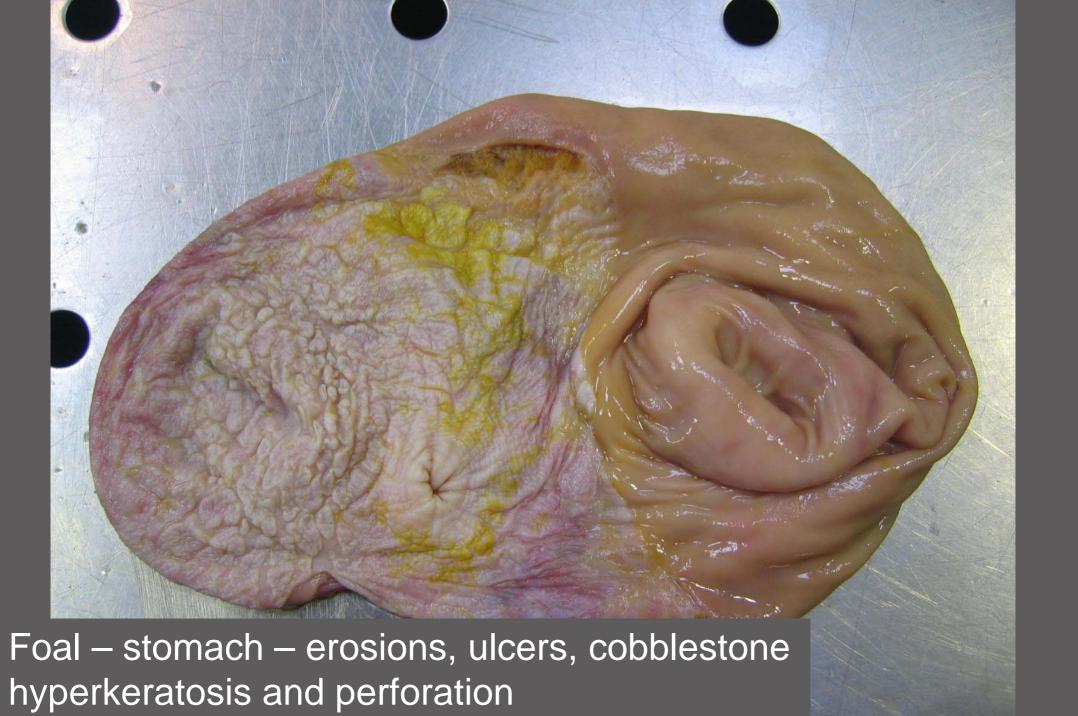


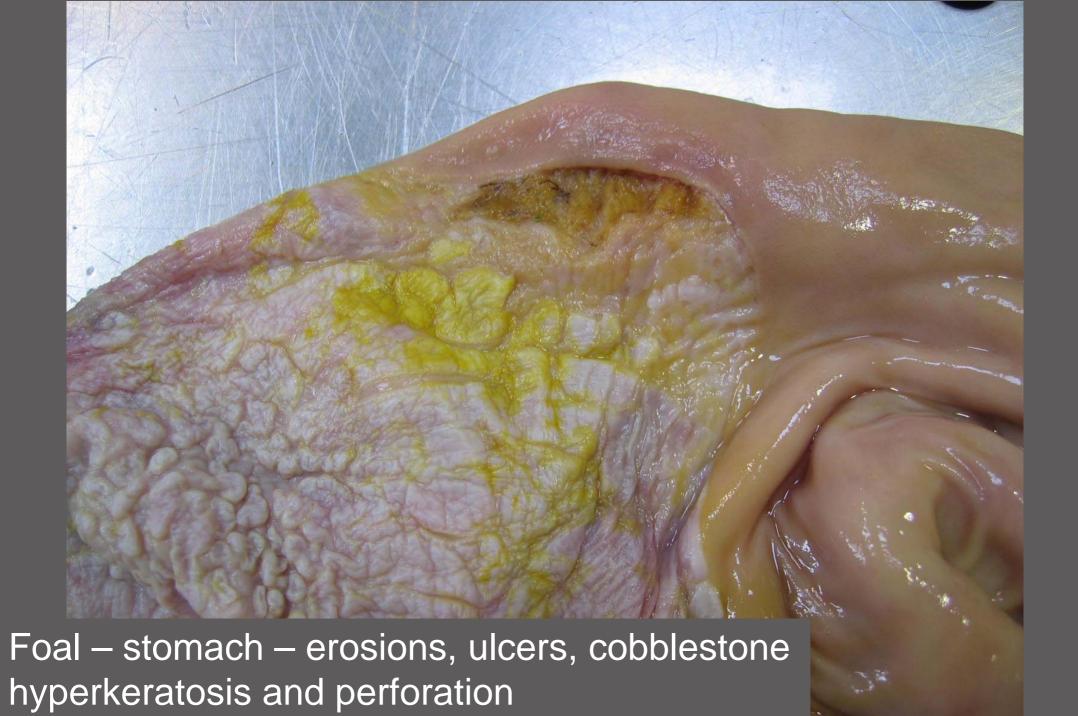
Esophagus – idiopathic hypertrophy of the distal part





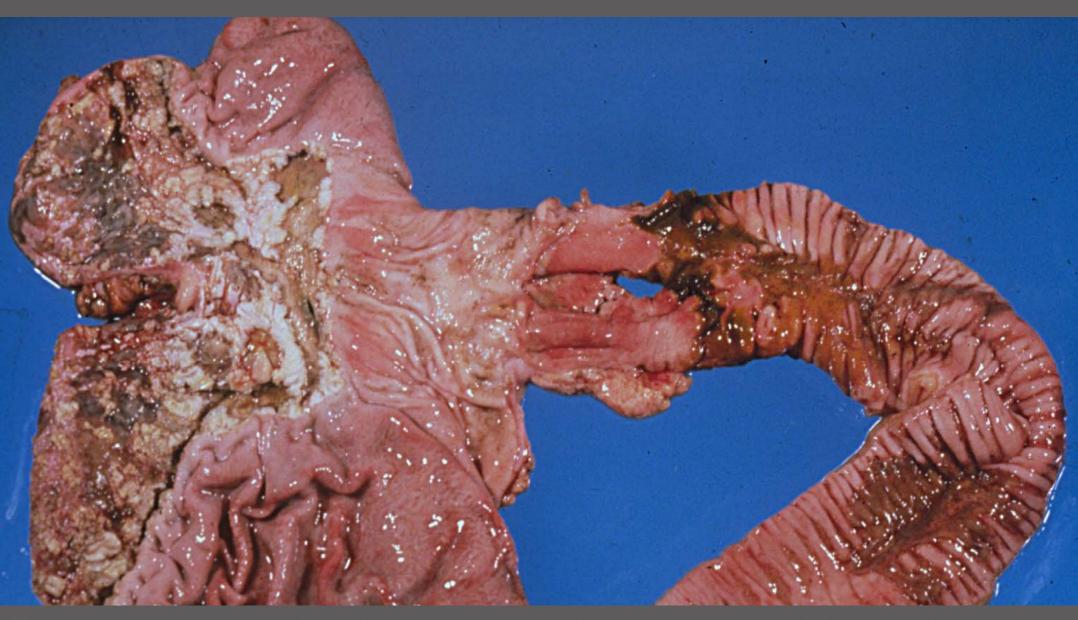
Foal – stomach – erosions, ulcers and cobblestone hyperkeratosis







Foal – stomach, duodenum – erosions, ulcers with duodenal ulceration and perforation



Foal – stomach, duodenum – erosions, ulcers with duodenal ulceration and perforation (J.M. King)



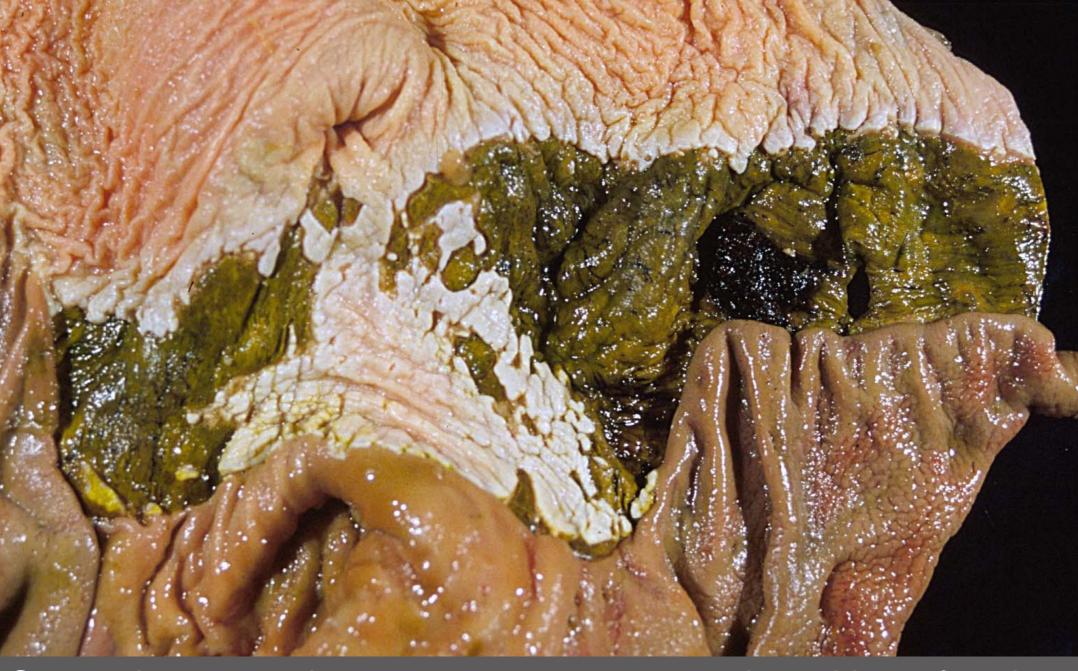
Foal – duodenum – stenosis with pancreatic duct dilatation



Foal – liver – severe cholestasis secondary to duodenal stenosis



Foal – esophagus – ascending esophageal linear ulceration secondary to gastric abnormal empting due to duodenal stenosis secondary to previous ulceration



Stomach – extensive pars squamosa ulceration with perforation



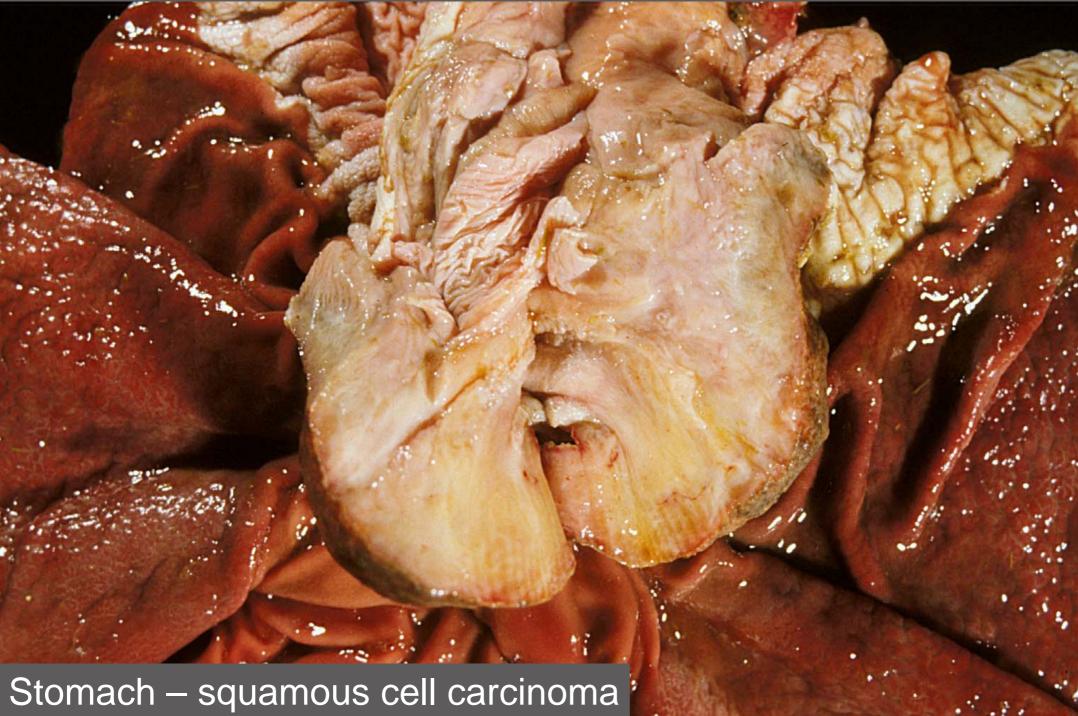
Stomach – chronic ulceration with bleeding– NSAID in this case

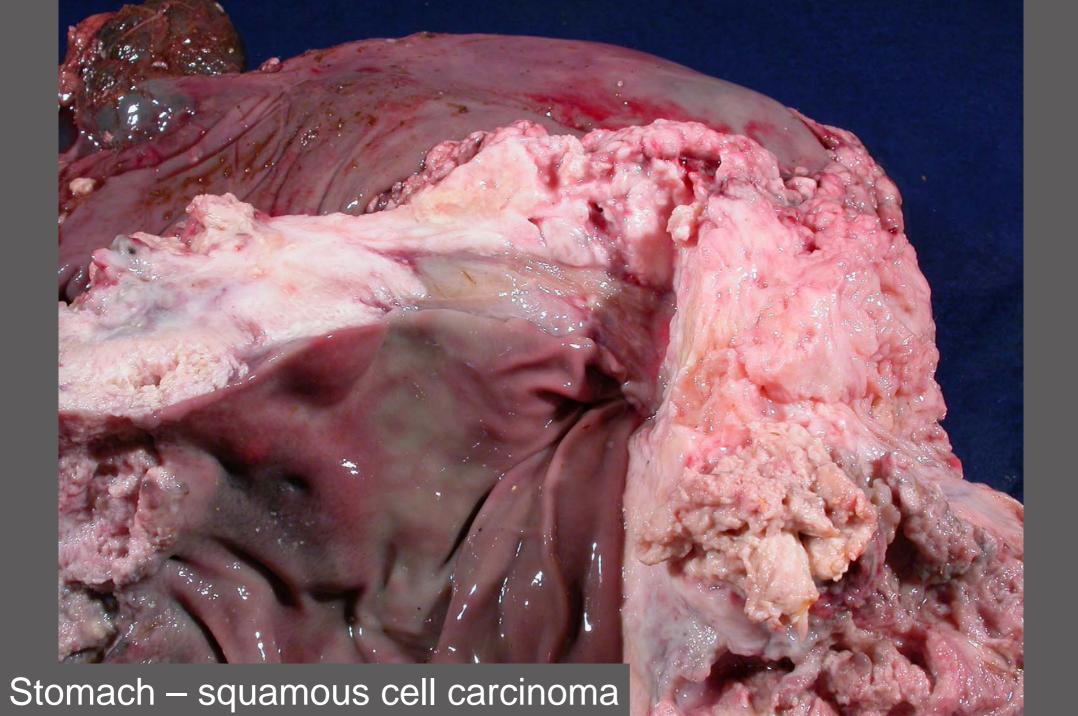


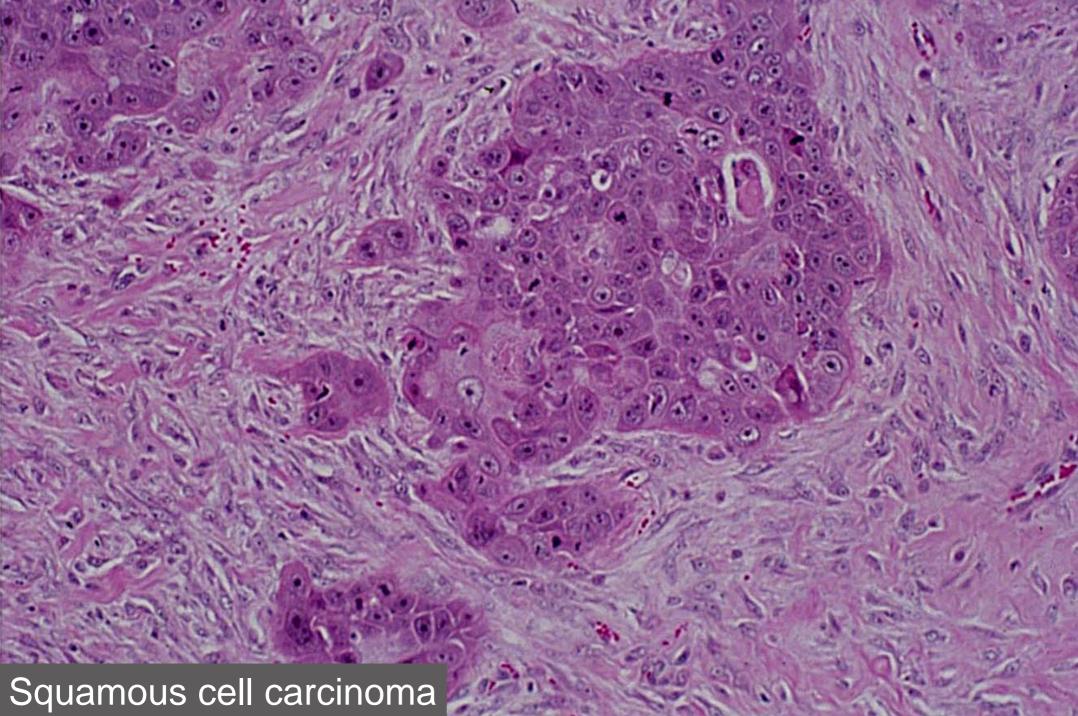
Colon – full thickness hemorrhagic necrosis – NSAID



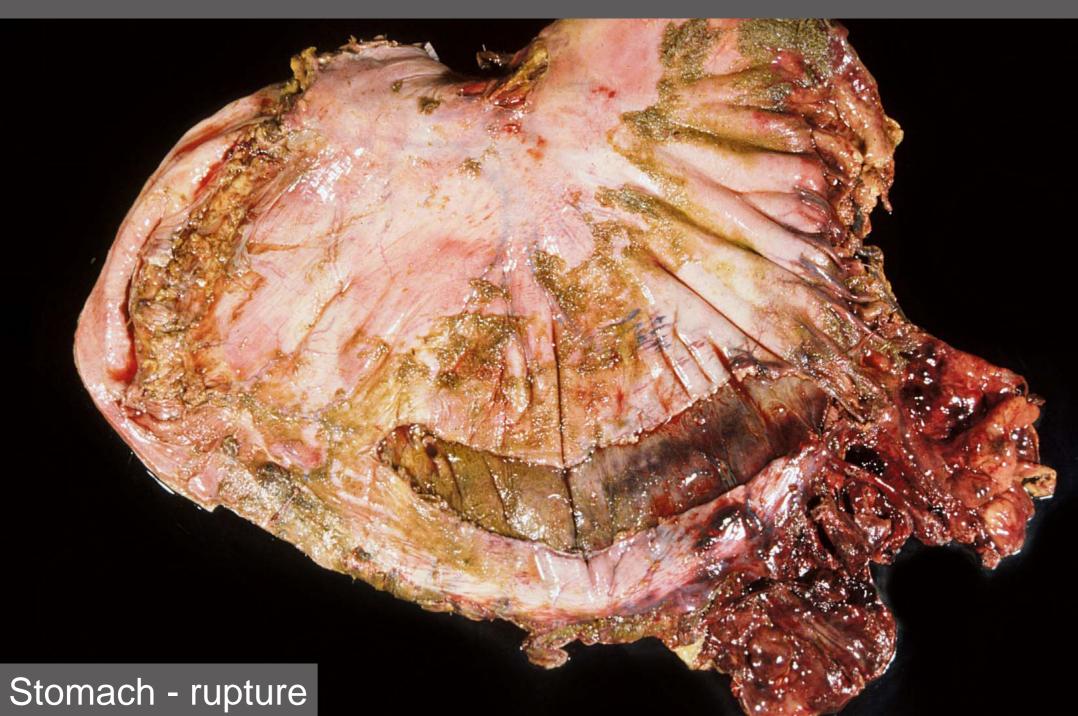
Stomach – pylorus ulcers

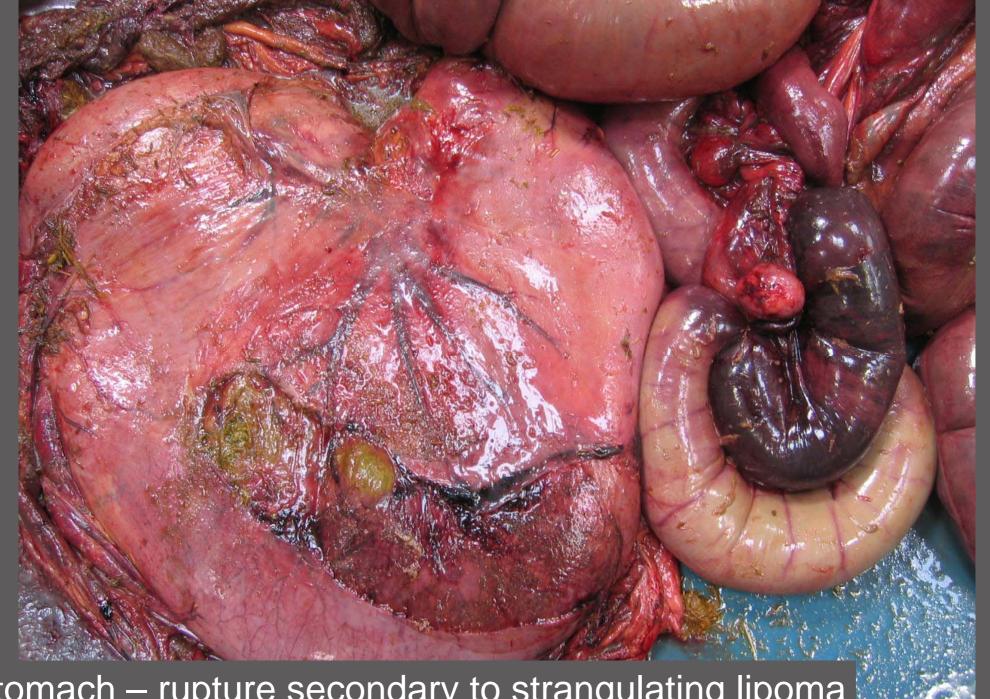




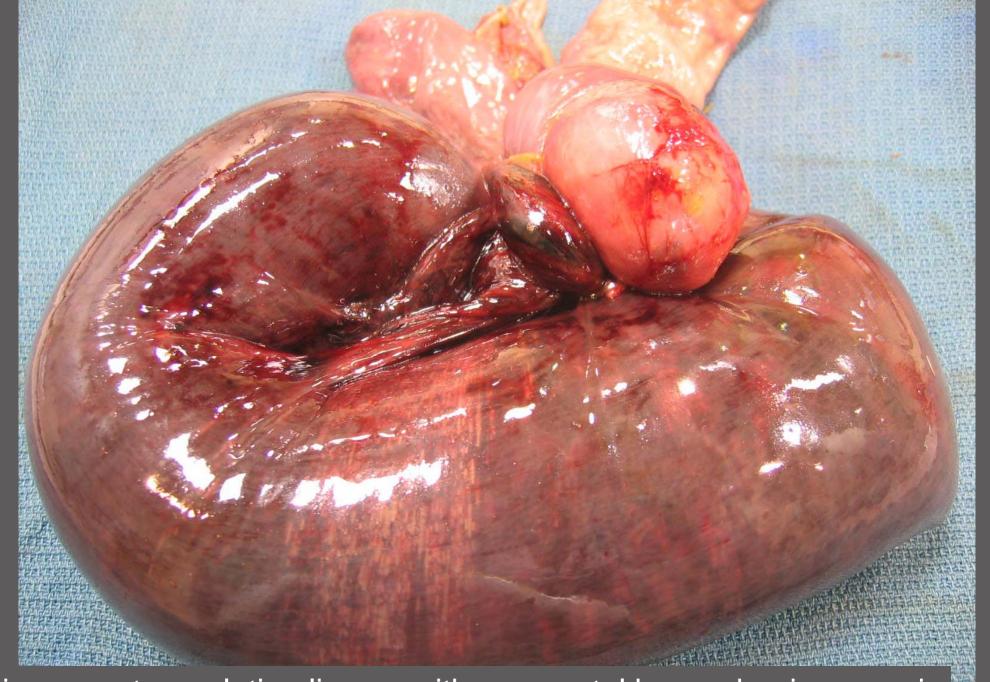




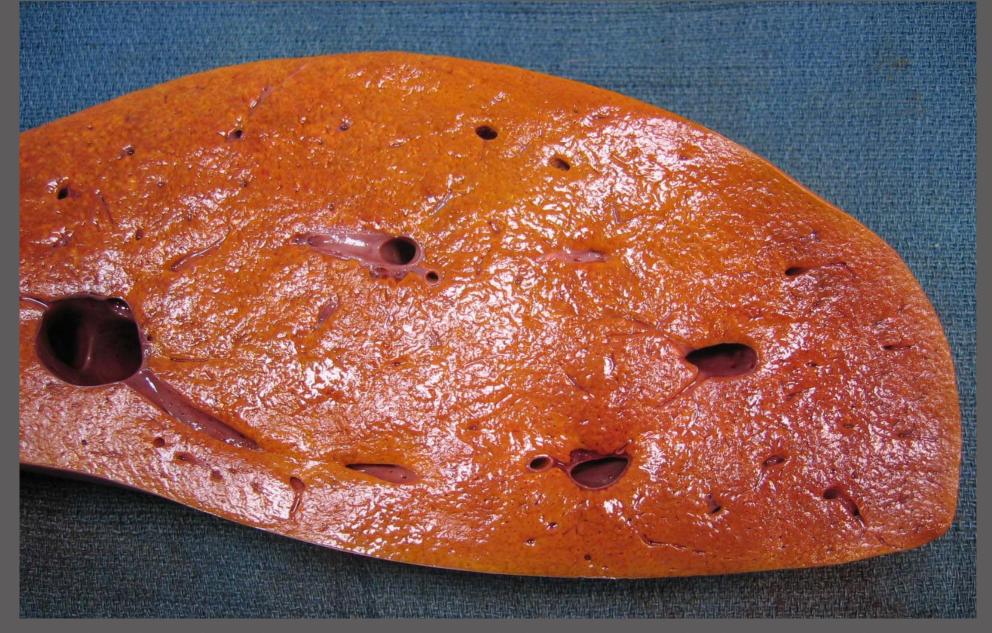




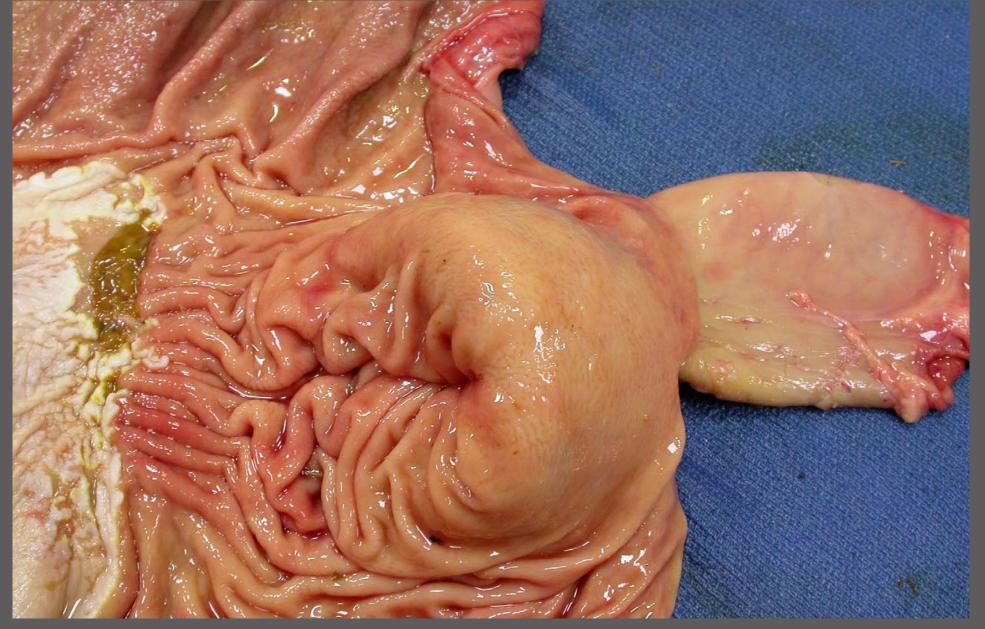
Stomach – rupture secondary to strangulating lipoma



Jejunum –strangulating lipoma with segmental hemorrhagic necrosis



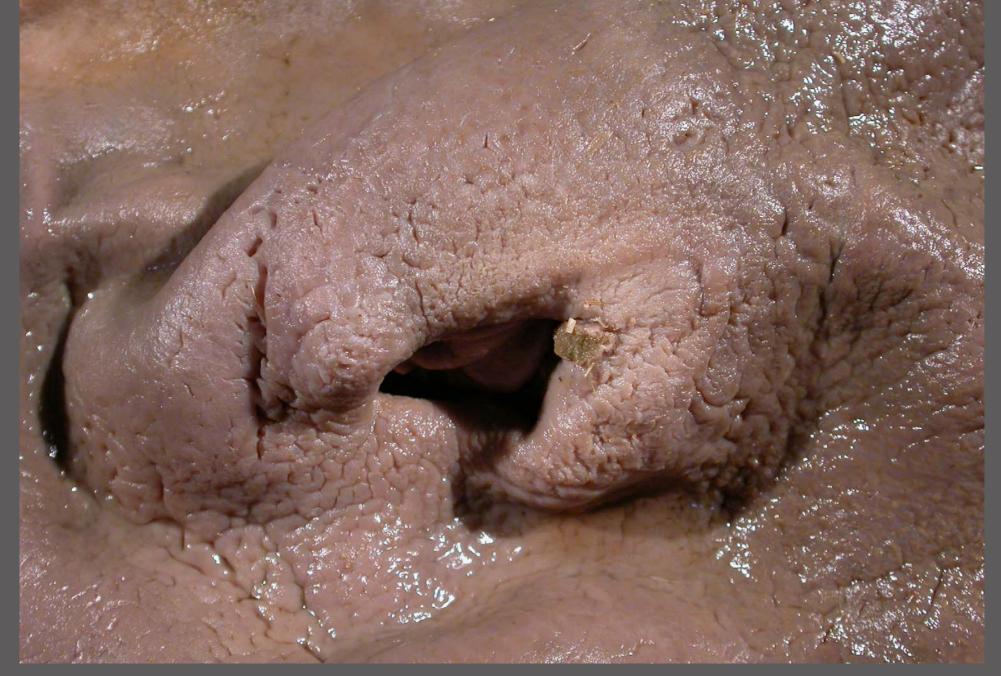
Liver – hydropic degeneration, lipidosis and cholestasis secondary to intestinal displacement



Stomach – Idiopathic pyloric muscular hypetrophy/hyperplasia - ulcer



Stomach – surgical duodenogastric anastomosis



Stomach – surgical duodenogastric anastomosis



Stomach – Gasterophilus intestinalis larvae (bots)

Stomach – *Gasterophilus intestinalis* larvae (bots) with focal hyperkeratosis





Stomach – Gasterophilus intestinalis ulcers and Draschia spp.



Stomach – *Draschia spp.* infestation (cross section).



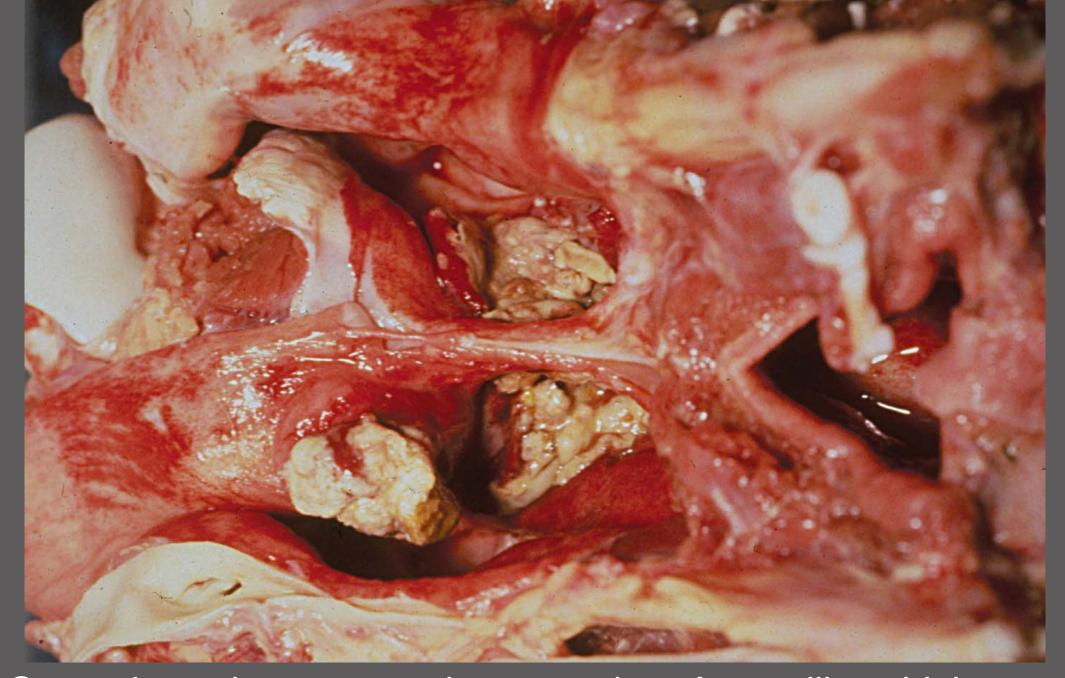
Stomach - Pyogranuloma - Draschia spp. infestation



Stomach – Draschia spp.



Stomach – clotted blood – guttural pouch mycosis exsanguination



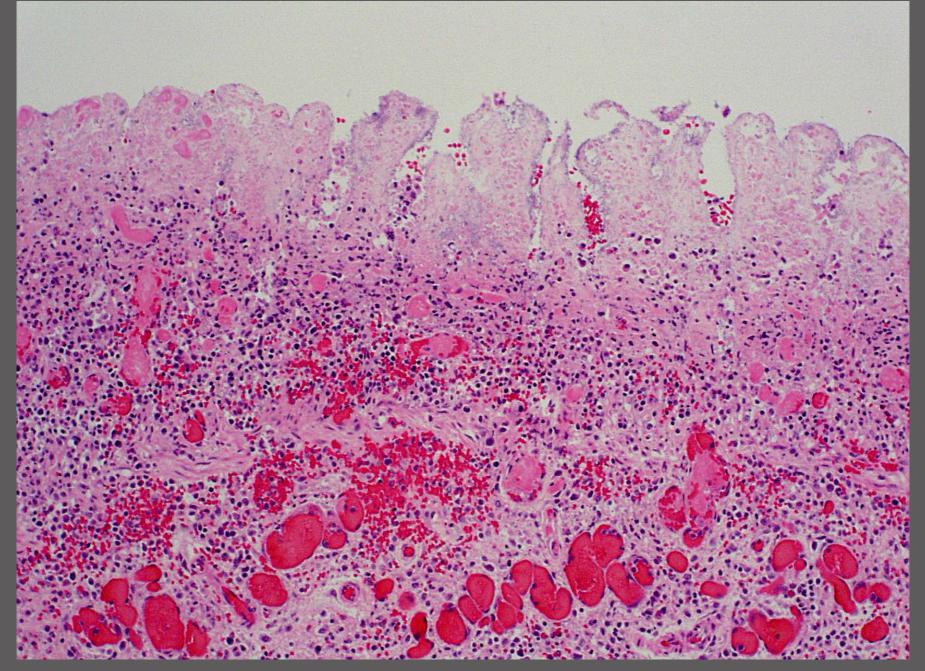
Guttural pouches – necrosis – mycotic – Aspergillus nidulans



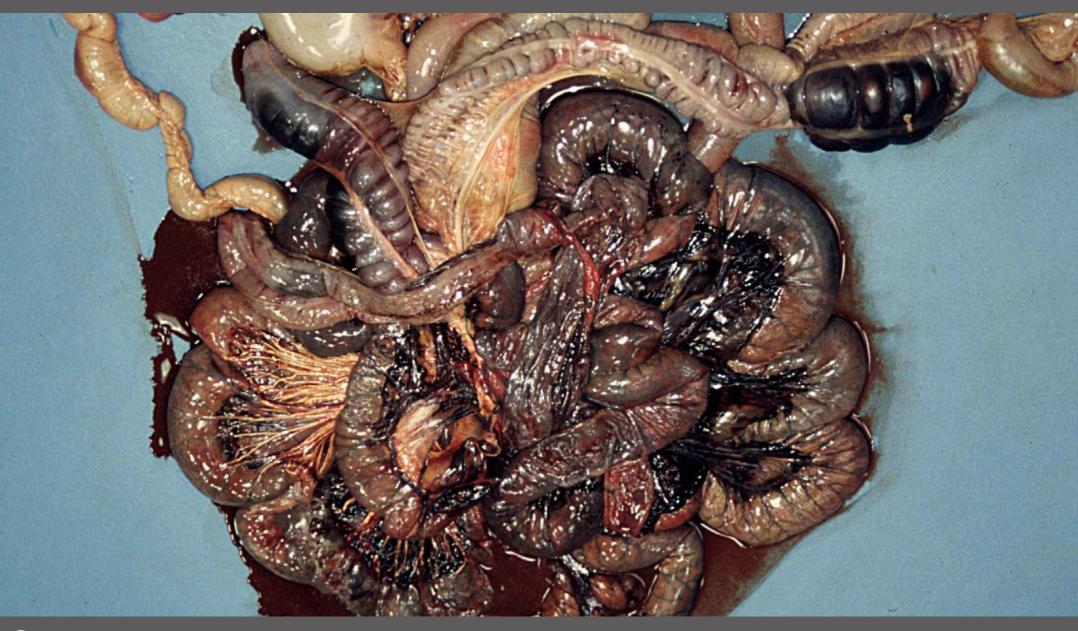
Small intestine – necrotizing anterior enteritis



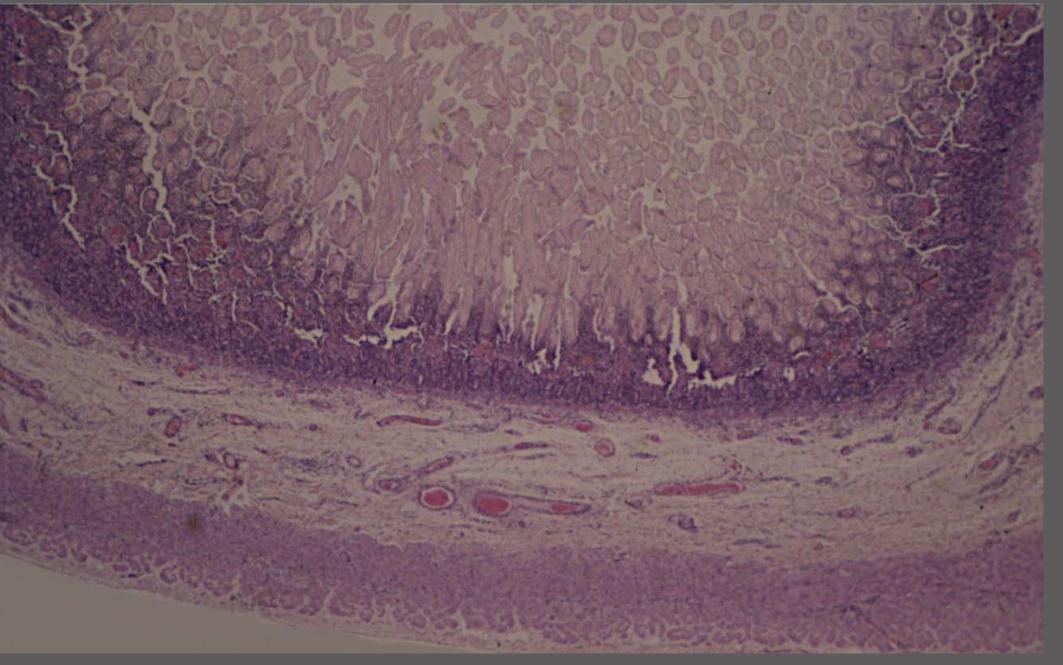
Small intestine – necrotizing anterior enteritis



Small intestine – necrotizing anterior enteritis - Salmonella



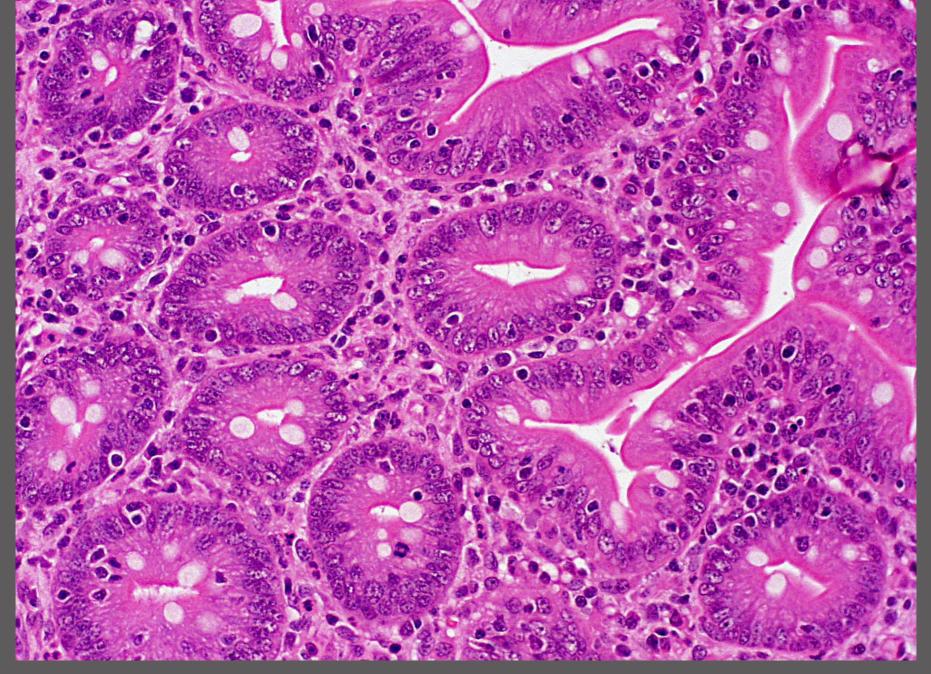
Small and large intestine – necrohemorrhagic enterotyphlocolitis – *Clostridium* spp.



Small intestine – necrosis – *Clostridium* spp.



Small intestine – ileum – proliferative ileitis – *Lawsonia* spp.



Small intestine – ileum – proliferative ileitis – *Lawsonia* spp.



Small intestine – ileum – proliferative ileitis – *Lawsonia* spp.



Cecum – idiopathic chronic dilatation, atony, muscular hypertrophy/hyperplasia and fibrinous cecal peritonitis



Colon rupture with secondary septic peritonitis (serosal side)



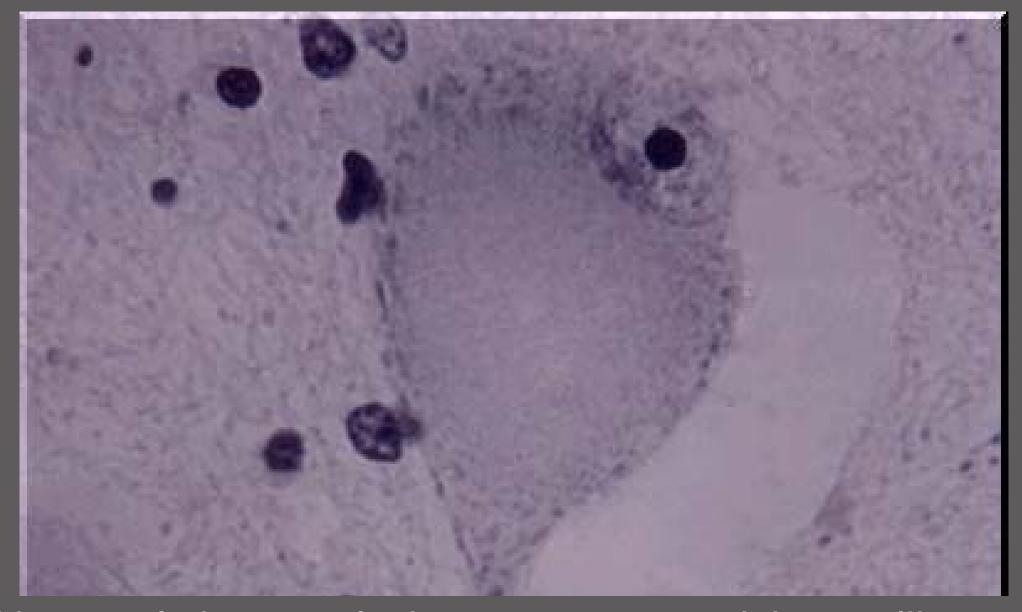
Colon rupture with secondary septic peritonitis (mucosal side)



Dysautonomia (grass sickness) – foamy abnormal digesta



Dysautonomia (grass sickness) like lesion – impaction with dry digesta



Neuronal chromatolysis – acute grass sickness-like lesions (from internet, unknown location)



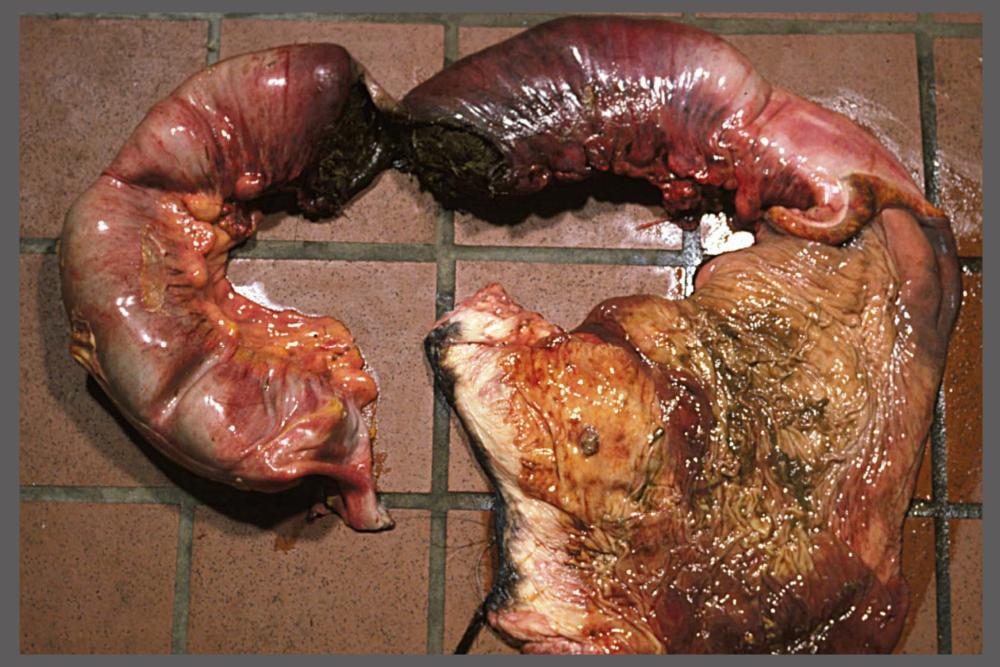
Stomach – idiopathic impaction with smooth muscle hypertrophy and hyperplasia



Overo foal – colonic aganglionosis (Hirschprung disease) – prominent diffuse hypopigmentation



Overo foal – colonic aganglionosis (Hirschprung disease) – severe meconium impaction

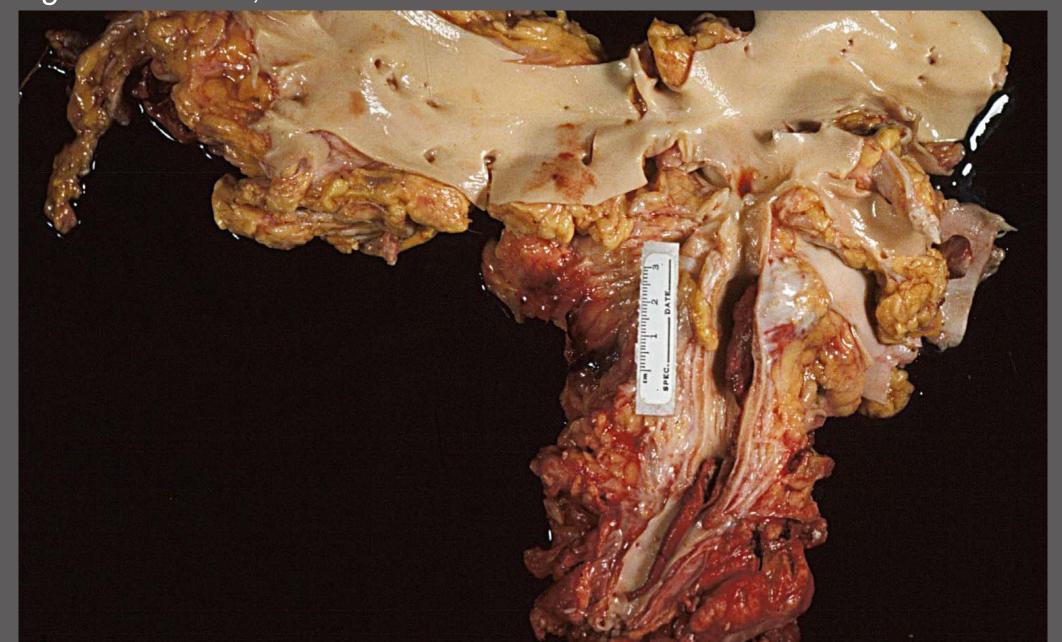


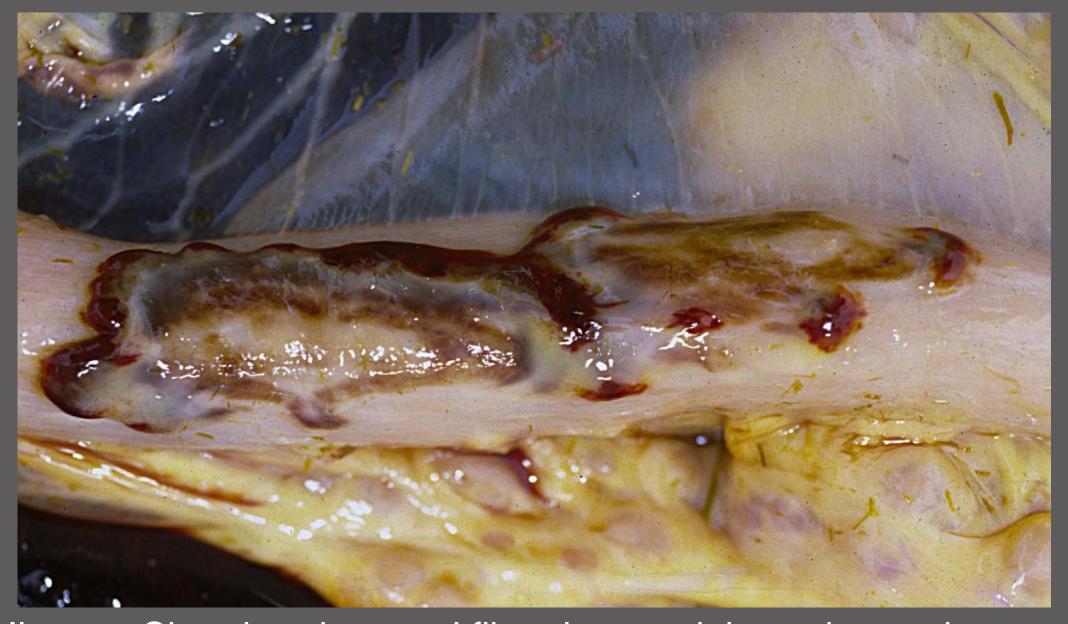
Distal colon – trauma → infarction → necrosis → rupture



Colon – infarcts – *Salmonella* spp. necrotizing colitis with thrombosis (DD: strongyle larvae; pyrrolizidine alkaloids hepatopathy

Cranial mesenteric artery endoarteritis and thrombosis – *Strongylus vulgaris* larvae L4, L5

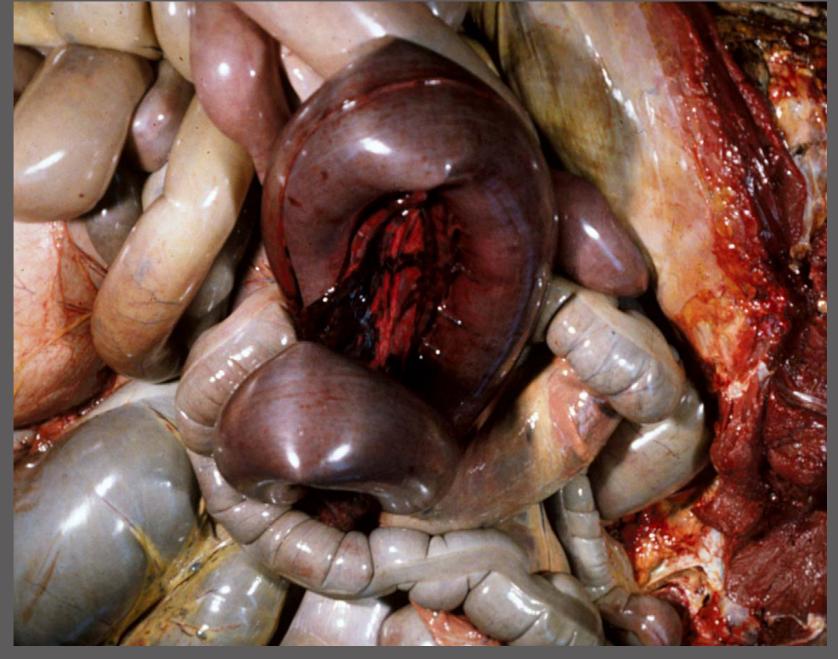




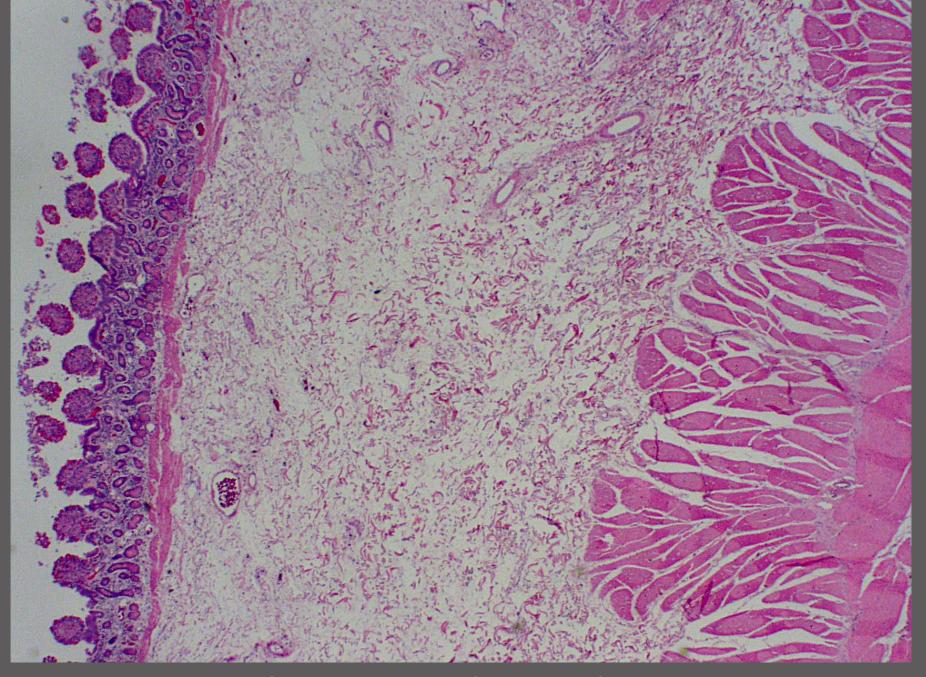
Ileum – Chronic subserosal fibrosing serpiginous hemorrhage (heamomelasma ilei) – cause unknown



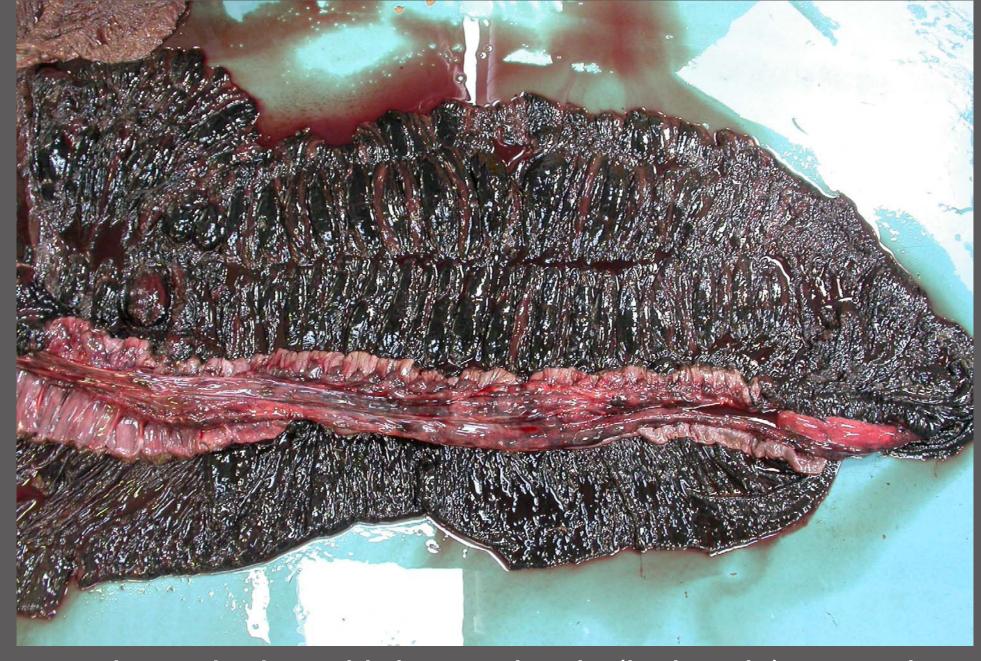
Ileum – Chronic subserosal fibrosing serpiginous hemorrhage with pseudomelanosis (heamomelasma ilei) – cause unknown



Jejunum – volvulus with hemorrhagic (ischemic) necrosis



Jejunum – severe edema secondary to dysplacement



Large colon volvulus with hemorrhagic (ischemic) necrosis

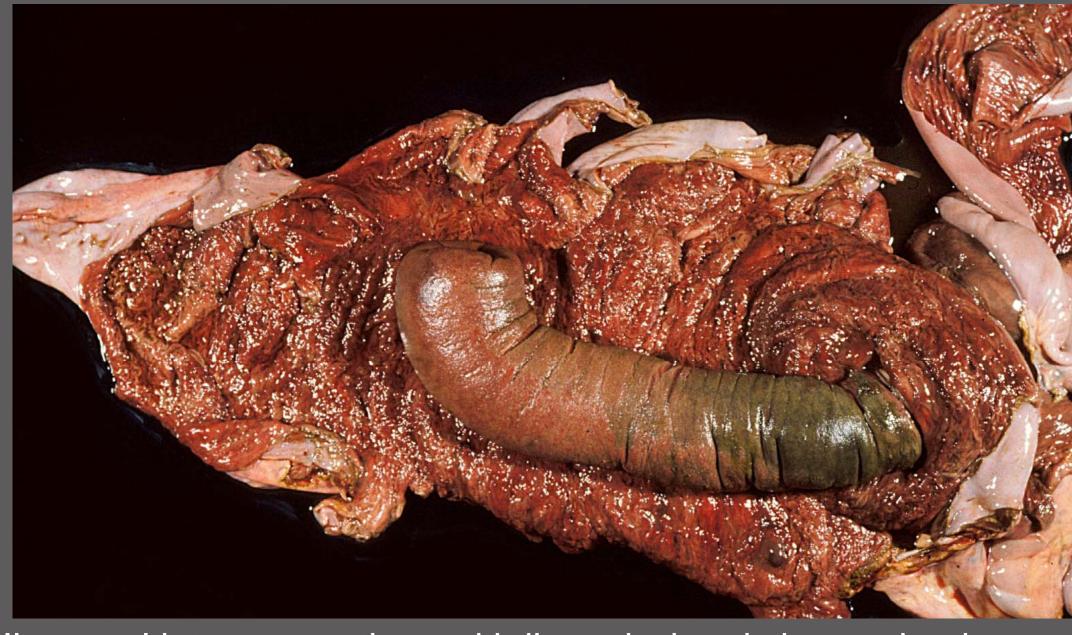


Jejunum – strangulating lipoma stalk with hemorrhagic (ischemic) necrosis





Diaphragmatic traumatic hernial ring (left) inducing small intestine segmental ischemic hemorrhagic necrosis



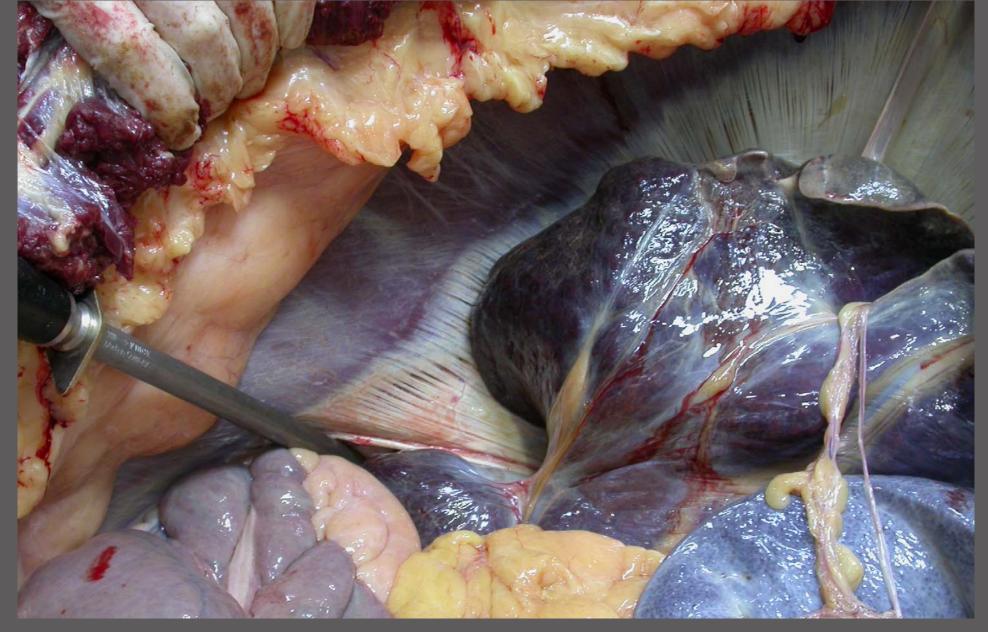
Ileocecal intussusceptions with ileum ischemic hemorrhagic necrosis



Cecocecal intussusceptions with cecal ischemic hemorrhagic necrosis



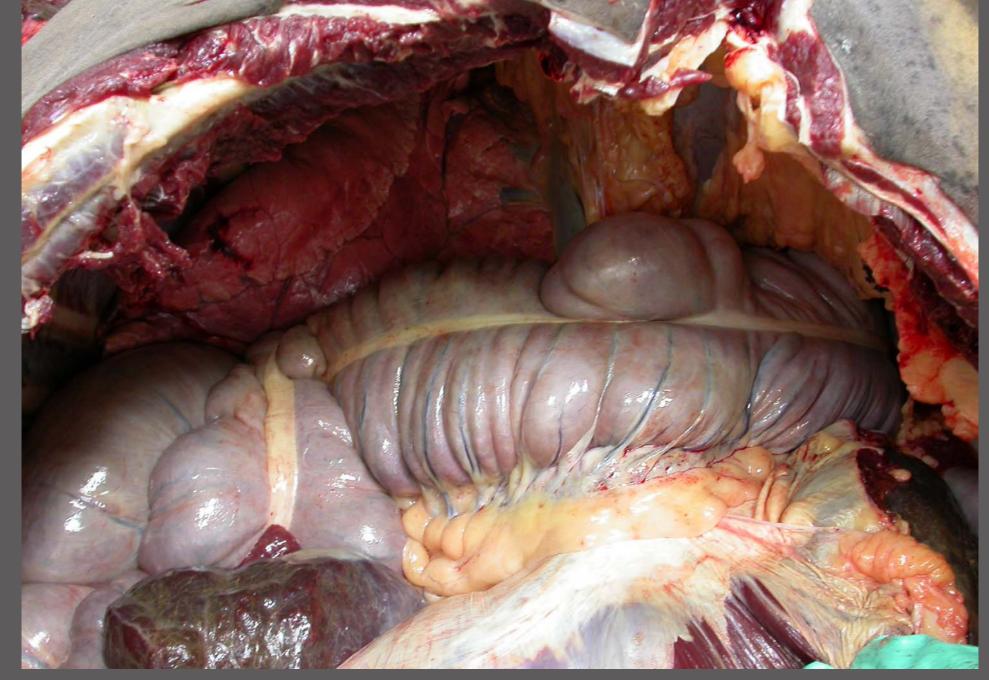
Cecocecal intussusceptions with cecal edema and hemorrhage



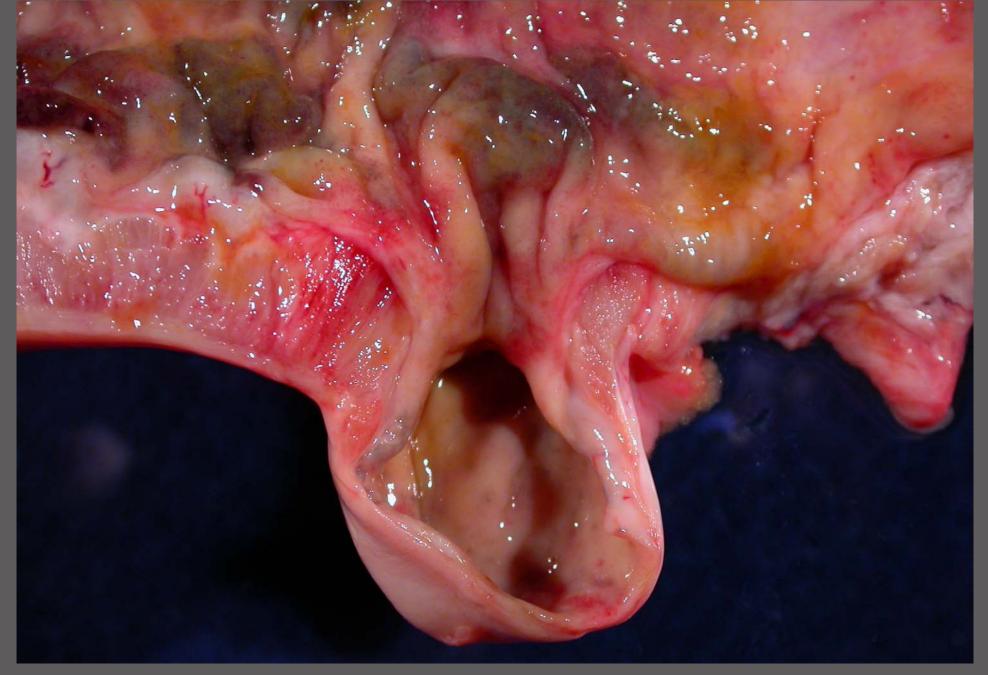
Chronic diaphragmatic hernia with abdominal visceral dysplacement



Chronic diaphragmatic hernia with abdominal visceral dysplacement



Chronic diaphragmatic hernia with abdominal visceral dysplacement



Ileum – hypertrophy/hyperplasia with diverticulum formation



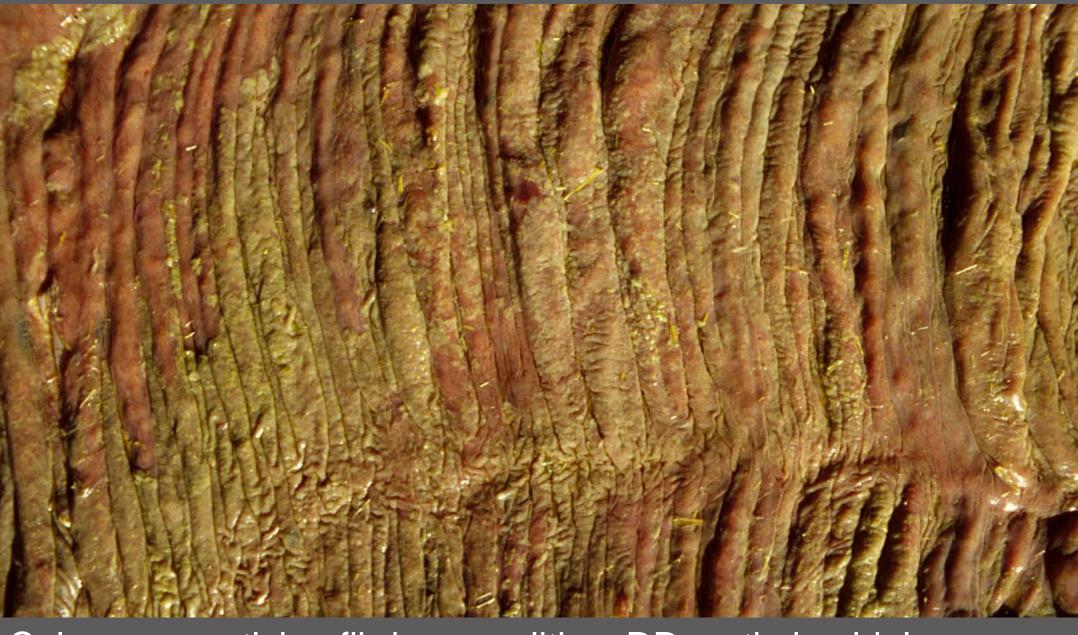
Foal – catarrhal and fibrinous enteritis – Salmonella spp.



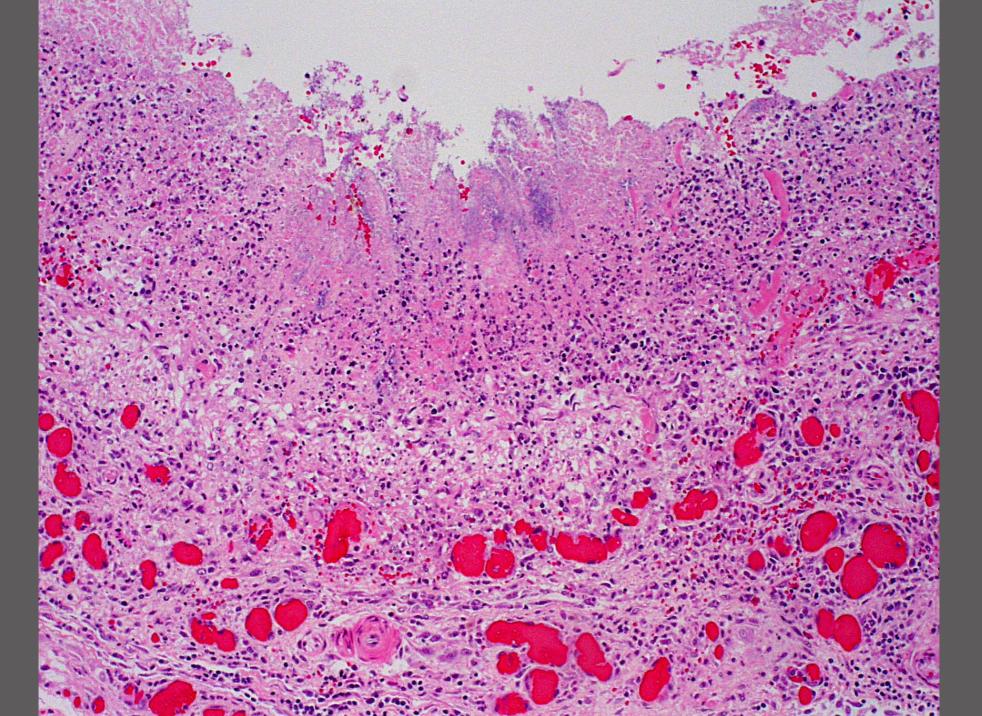
Foal – catarrhal and fibrinous enteritis – Salmonella spp.

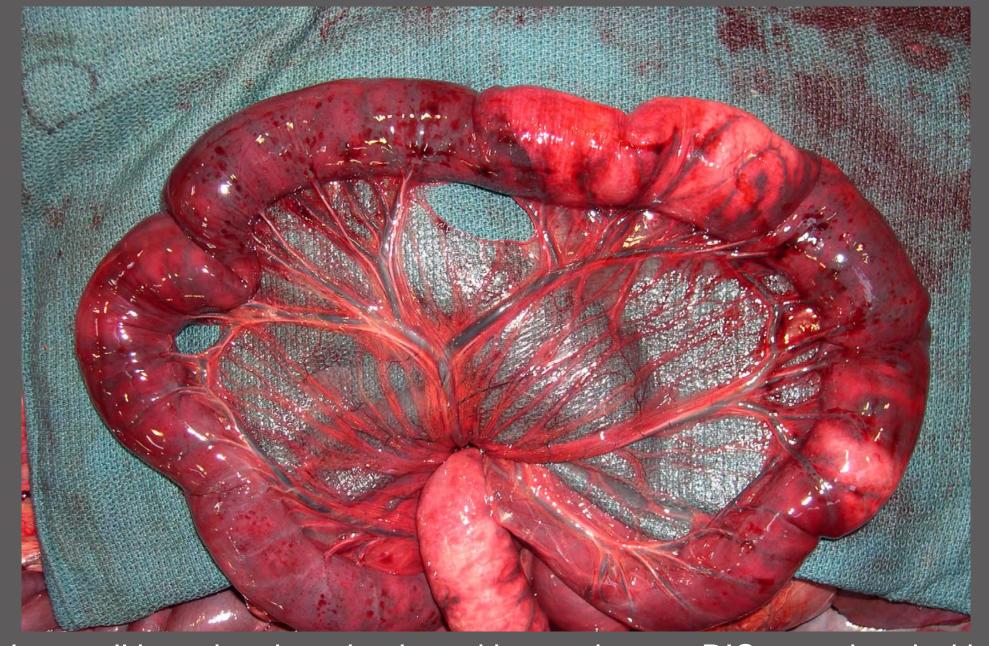


Large intestine – chronic necrotizing typhlocolitis – Salmonella spp.

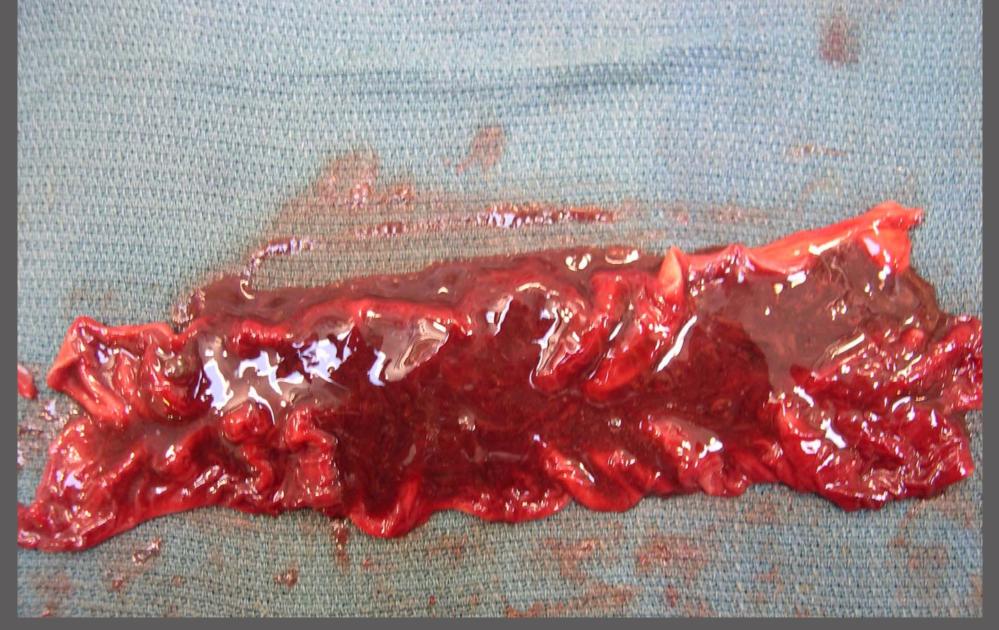


Colon – necrotizing fibrinous colitis – DD: antimicrobial, Salmonella spp., Clostridium spp., other bacteria

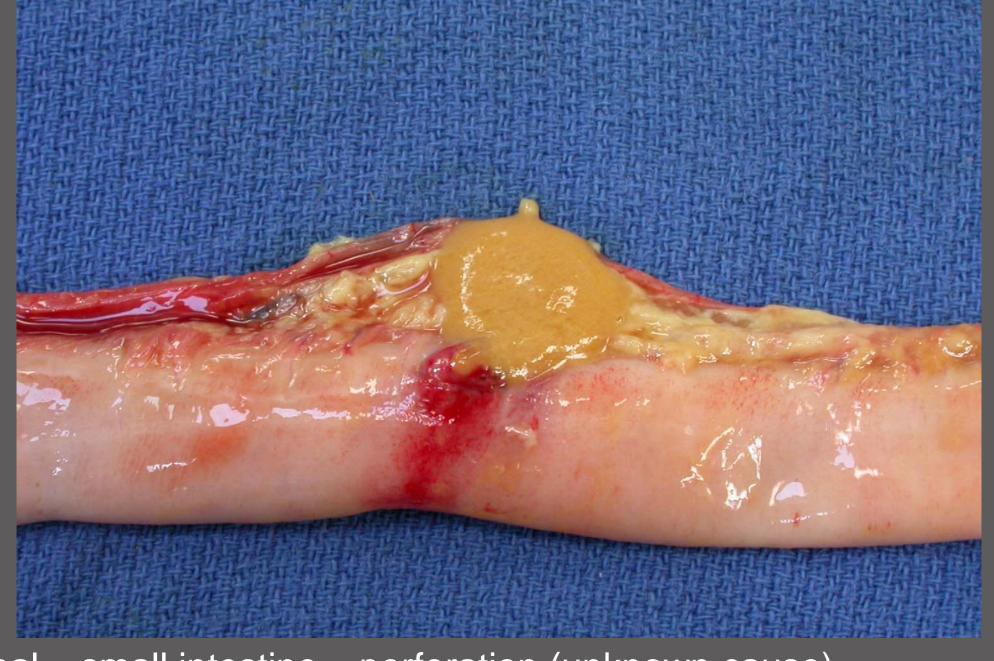




Foal – small intestine thrombosis and hemorrhage – DIC associated with sepsis



Foal – small intestine thrombosis and hemorrhage – DIC associated with sepsis

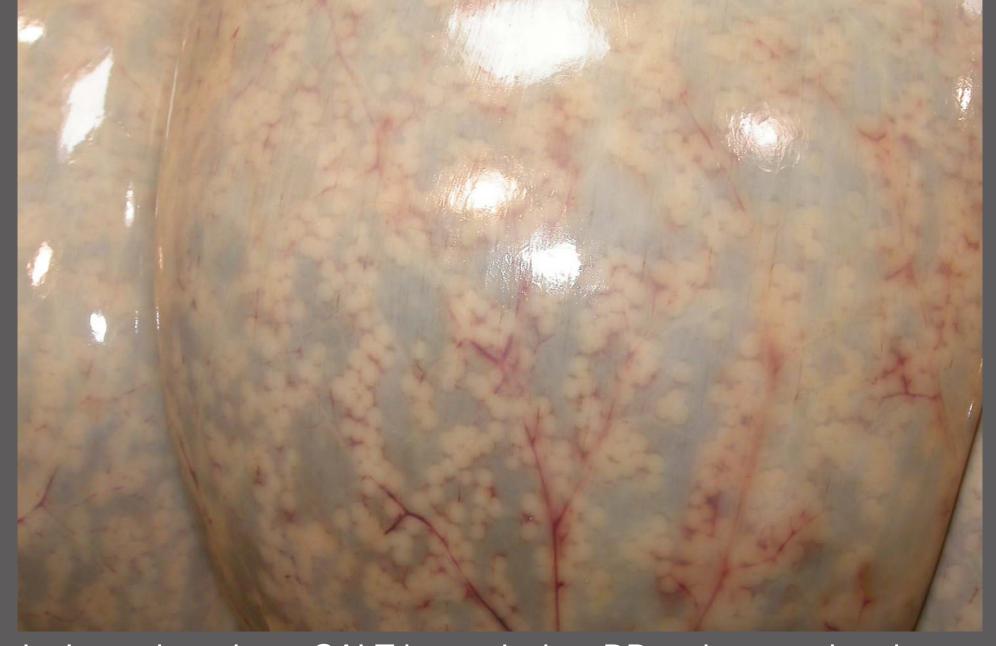


Foal – small intestine – perforation (unknown cause)





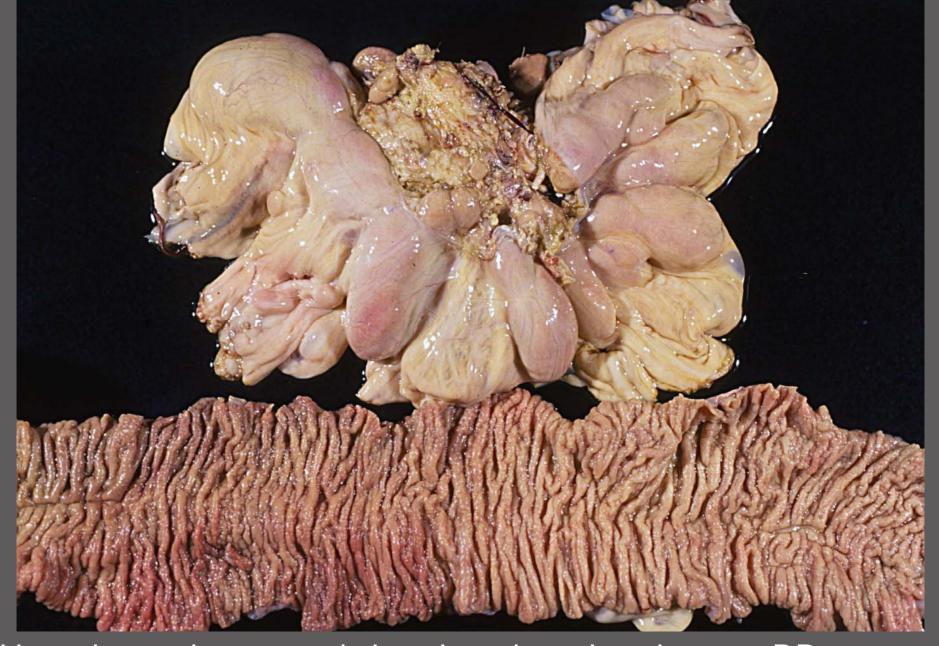
Colon – severe edema – DD: displacement; Potomac horse fever; Salmonella; hypoproteinemia



Foal – Large intestine – GALT hyperplasia – DD: unknown; chronic infection; Salmonella.



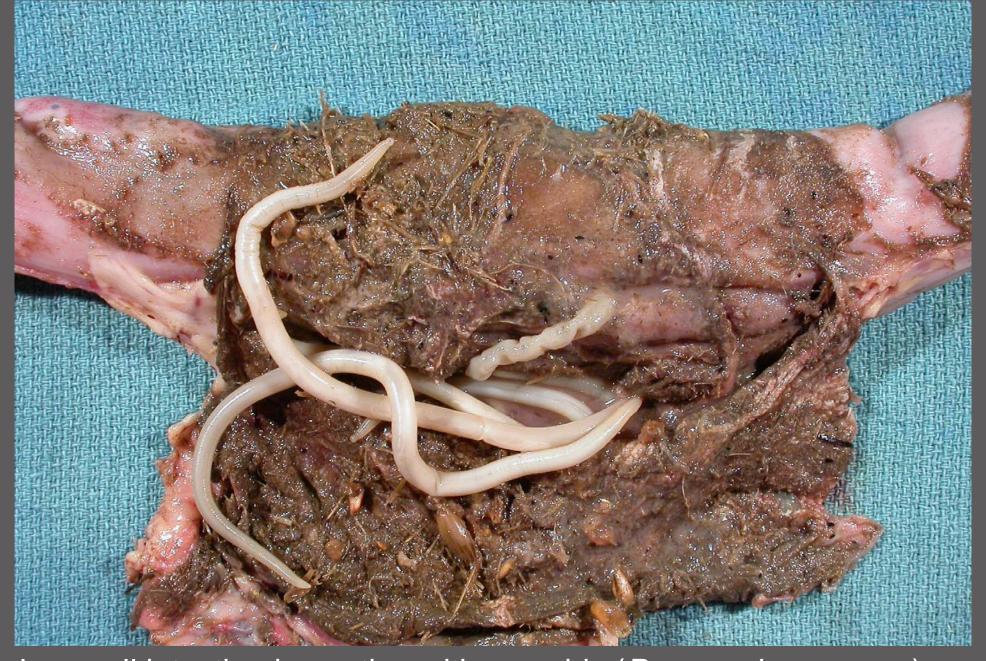
Foal – Large intestine – severe acute systemic hemorrhage – purpura hemorrhagica (University of Milano – Prof. M. Finazzi)



Small intestine and mesenteric lymph nodes – lymphoma – DD: granulomatous enteritis



Pelvic flexure – lithobezoar with focal compression, necrosis and rupture

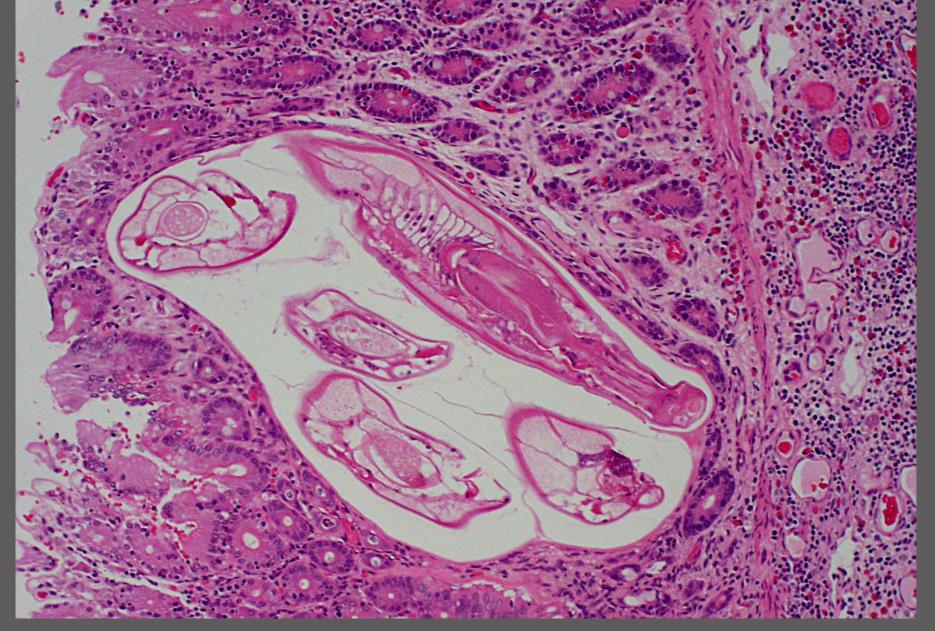


Foal – small intestine impaction with ascarids (*Parascaris equorum*)





Large intestine – Strongylus spp. adults and *Cyathostomidae* adults and encysted larvae

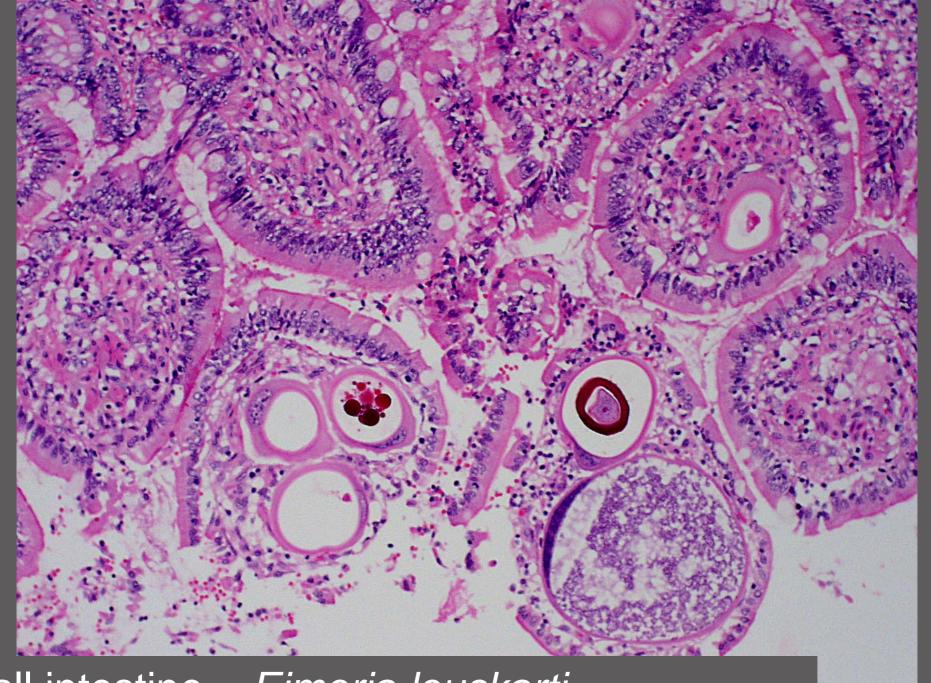


Large intestine – *Cyathostomidae* encysted larva and moderate chronic enteritis with eosinophils

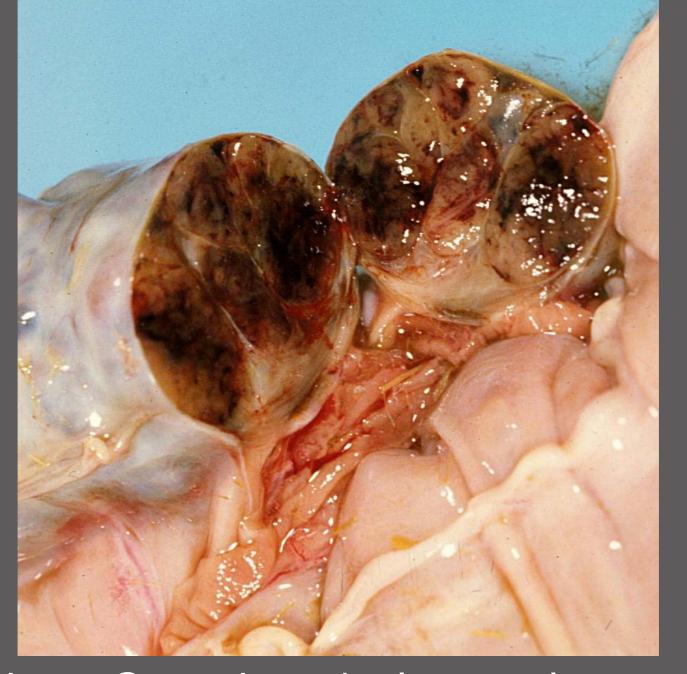


Ileocecal valve – Severe cestodiasis (*Anoplocephala perfoliata*) with severe edema and ulcerative chronic typhlitis

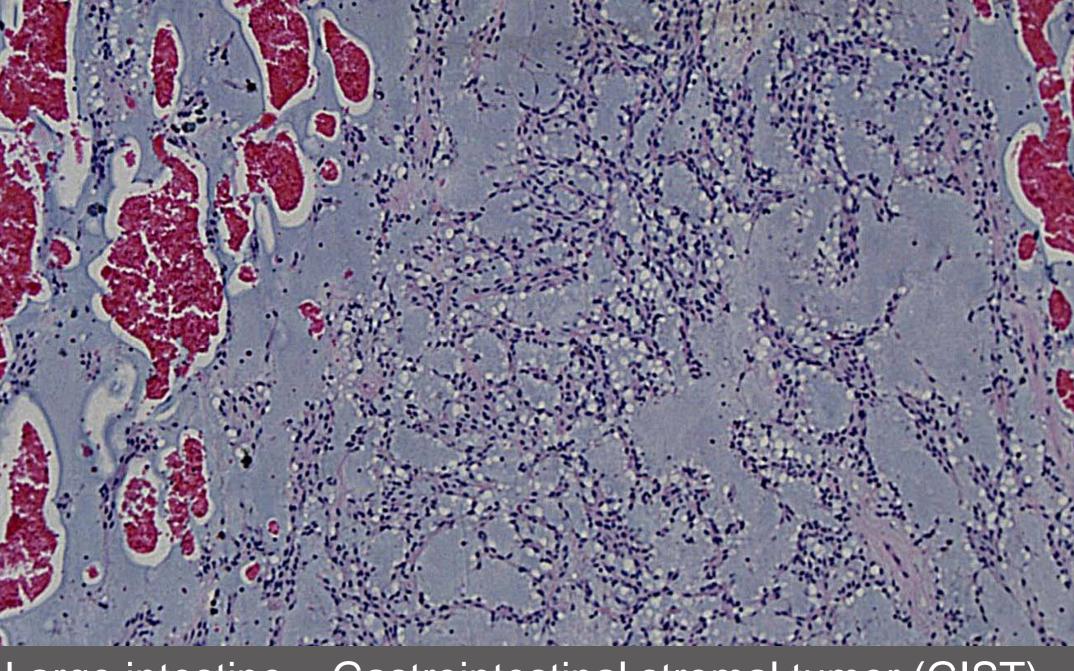




Small intestine – Eimeria leuckarti



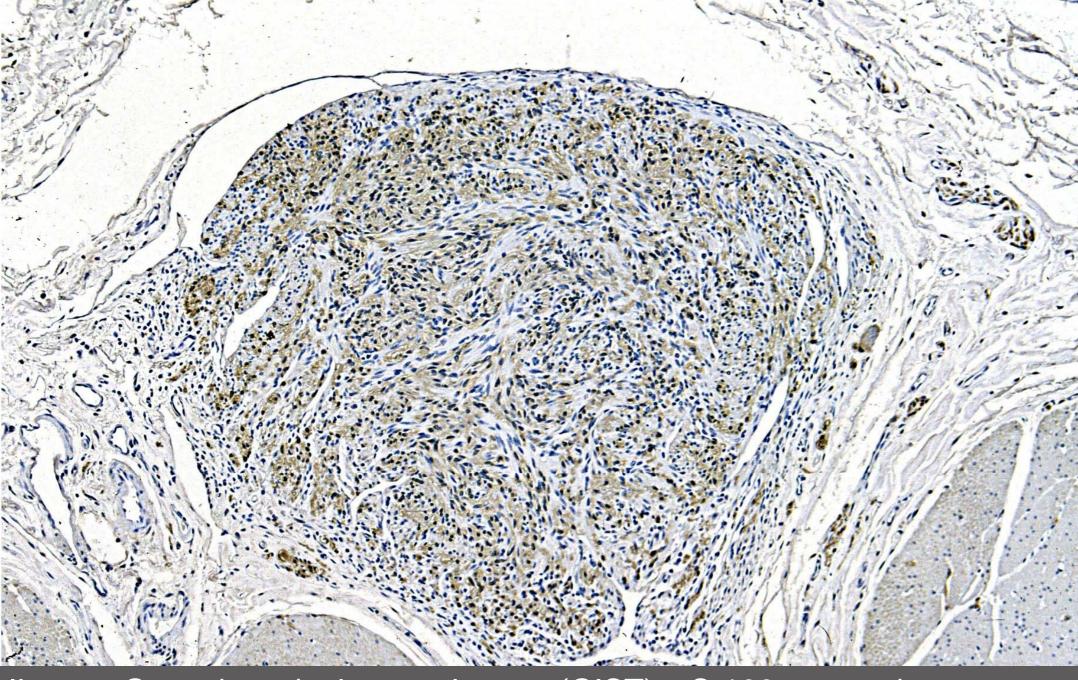
Large intestine – Gastrointestinal stromal tumor (GIST)



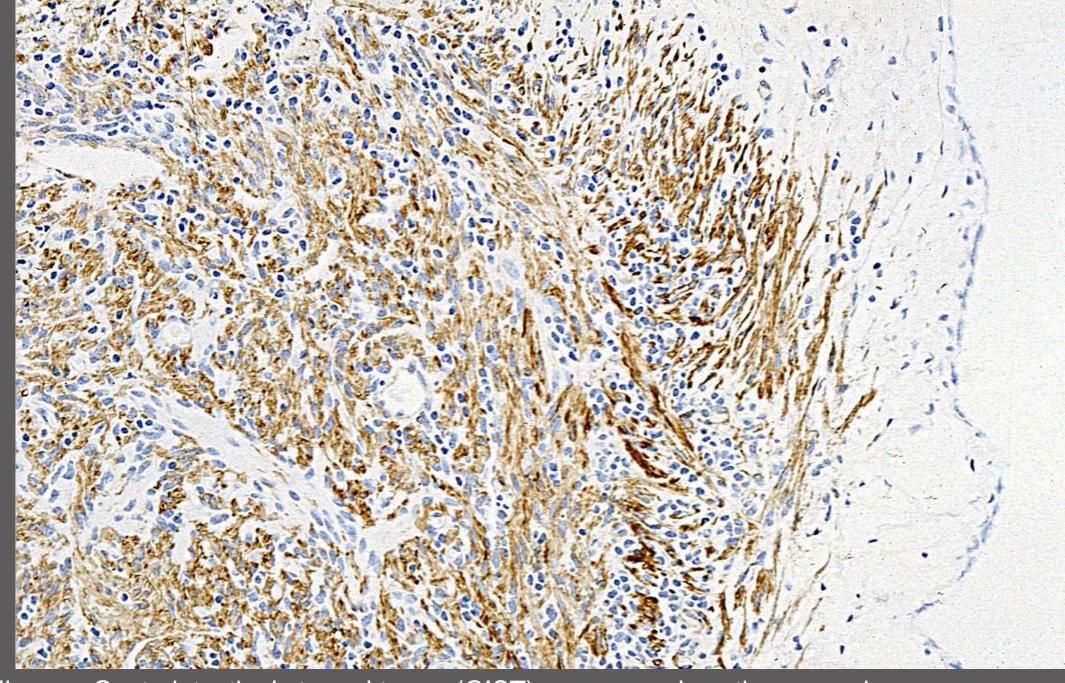
Large intestine - Gastrointestinal stromal tumor (GIST)



lleum – Gastrointestinal stromal tumors (GIST)



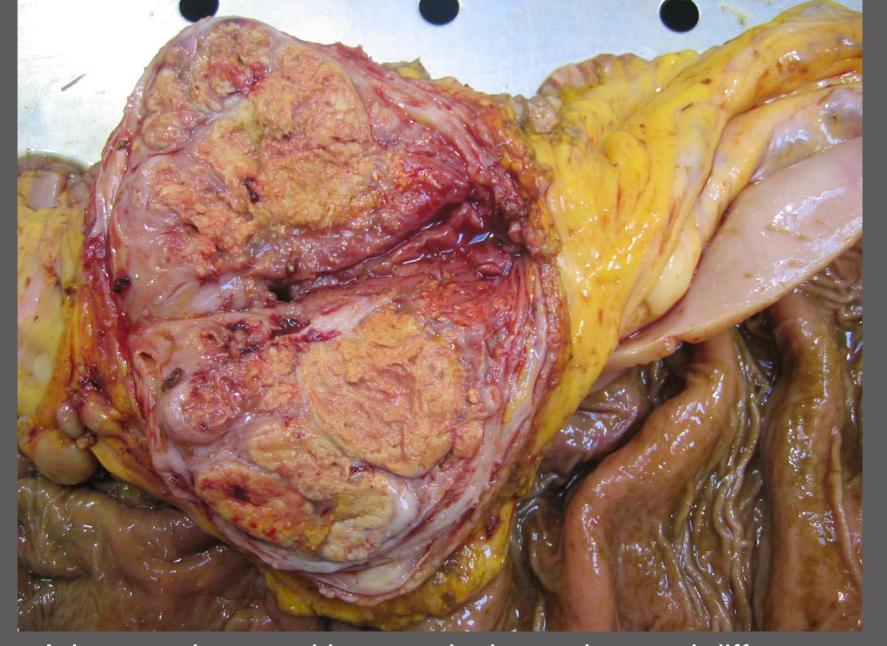
Ileum – Gastrointestinal stromal tumor (GIST) – S-100 expression



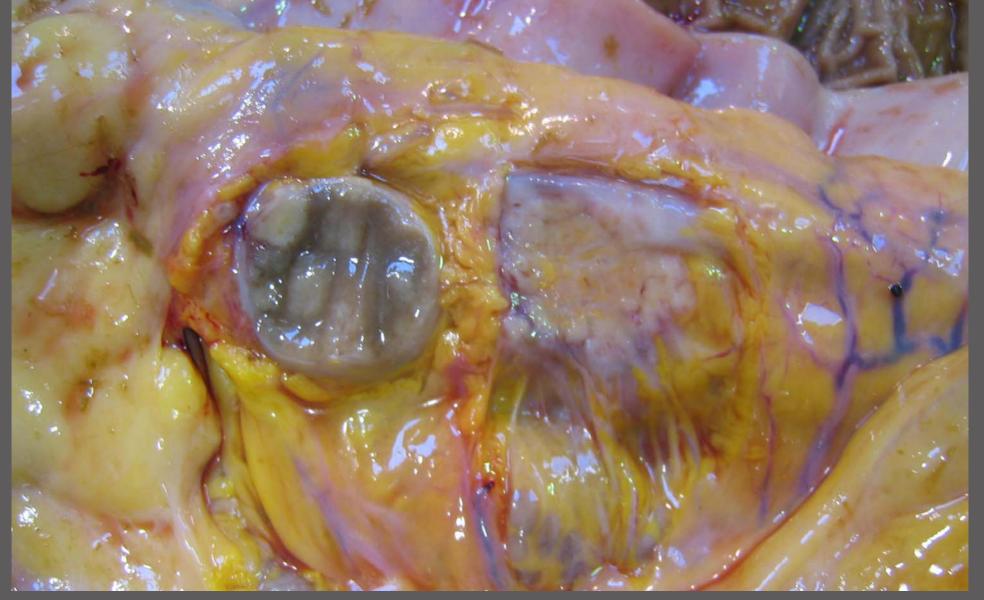
Ileum – Gastrointestinal stromal tumor (GIST) – sm. muscle actin expression



Colon – Adenocarcinoma with stenosis, impaction, and diffuse smooth muscle hypertrophy/hyperplasia and lymph node metastasis



Colon – Adenocarcinoma with stenosis, impaction, and diffuse smooth muscle hypertrophy/hyperplasia and lymph node metastasis



Colon – lymph node – Adenocarcinoma with stenosis, impaction, and diffuse smooth muscle hypertrophy/hyperplasia and lymph node metastasis



Mesenteric lymph node abscess – Streptococcus equi equi



Foal – Mesenteric Tymph node caseous necrosis – *Rhodococcus equi*