

EPD is not one specific disease.

Common causes include bacterial, fungal or parasitic infections.

ESS™ Recovery Shampoo & Spray is an effective treatment and preventative therapy.

What is Equine Pastern Dermatitis (EPD) ?

- This is a non-specific term which indicates inflammation of the pastern
- Colloquial names include: **Scratches, Mud Fever, Mud Rash, Grease Heel, Dew Poisoning, Grapes, etc.)**
- Pastern dermatitis is not a specific disease but rather a “cutaneous reaction pattern” in the horse. This means that there can be a number of different causes with a similar appearance! You must identify the actual underlying etiology (cause) in order to accurately treat the problem.
- That’s why many treatments may be ineffective because the correct specific cause has not been identified and/or the secondary bacterial infection was not treated.



EPD can vary in appearance... what are the common forms?

Mild Form: (Scratches, Mud Fever, Mud Rash)

- The mild form is the most common form.
- The skin is thickened, loss of hair along with scale & crusting.
- Lesions may be itchy and/or painful.

Exudative Form (Grease Heel, Dew Poisoning)

- Skin is red & inflamed skin
- The presence of serous (clear) or purulent exudate (pus)
- The skin may be eroded, ulcerated and raw.

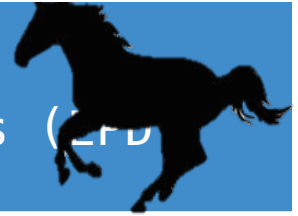
Chronic Proliferative Form (Grapes, Verrucous pododermatitis)

- Excessive granulation tissue that becomes massively thickened (lichenified) and nodular.
- This tissue can become cracked and may bleed with normal movement.

What causes EPD (all forms)?

Your veterinarian can be instrumental in helping to figure out the underlying causes!

- Exposure of the pastern to a constant wet environment, this macerates the skin and which leads to secondary bacterial infection.
- Staphylococcal bacteria are the most common cause of infection.
- Other infections which can occur due to constant environmental moisture include: Dermatophilosis (rain rot), Ringworm (fungus) & Malassezia (yeast).



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- Parasitic infections with mites. Chorioptes mites are most common in draft horses with heavy feathers.
- Contact irritants & allergy: this typically includes plants, chemicals and muddy/wet pastures as examples.

Beware... Immune-mediated disease can mimic EPD! **Photoactivated vasculitis (Pastern Leukocytoclastic Vasculitis)**

Photoactivated vasculitis (Pastern Leukocytoclastic Vasculitis) is an immune disease that primarily affects white leg. The symptoms are induced by sun exposure ("photo-aggravated") so the disease is seen primarily in the summer months.

This disease typically causes well-demarcated, painful lesions on the pasterns and leg edema (swelling).

Pemphigus foliaceus (immune mediated disease)

Pemphigus foliaceus is an immune mediated blistering disease that can cause crusting of the pasterns or may become generalized and cover the entire body.

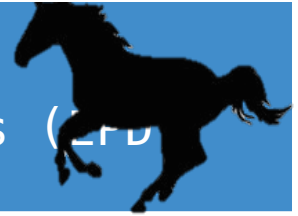
How does my veterinarian determine the most likely cause of EPD in my horse? The medical history of your horse is most important!

Typical questions may include:

- Are the symptoms seasonal or non-seasonal?
- Are the lesions itchy or painful?
- What topical medications or home remedies have been applied?
- What are the bedding conditions?
- Is there excess moisture in the horse's environment such as wet or muddy pastures?
- Is there exposure to sand pastures?
- What is the insect burden like in your area?
- Are any other horses in the stable affected? Looking for potential contagion.
- Are any people in the stable affected? Looking for potential zoonosis (ringworm, MRSA...).
- Has there been any exposure to clover pastures, St. John's Wort, Buck wheat, or perennial rye grass? All can cause contact photosensitization.

Diagnostics used to identify specific cause of EPD

- Cytology by impression smear or acetate tape prep stained & examined microscopically.



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- Bacterial culture & sensitivity to identify the bacteria & the correct antibiotic therapy.
- Skin biopsy involving a removal of a small piece of tissue and examined microscopically by a pathologist.
- Fungal culture (DTM) for to identify a strain of ringworm such as *Trichophyton equinum*
- Skin scrapings to rule out mites (*Chorioptes* most common in draft horses).
- Trichogram which involves hair “plucking” & microscopic examination of hair.
- Blood tests such as complete blood count (CBC) and serum chemistry (liver, kidney, etc. evaluation) to assess for underlying illness and possible liver-associated photosensitization.

What therapies are recommended for EPD?

- **MOST IMPORTANT:** the best recommendations occur AFTER the determination of the actual cause!!
- Keep horses in clean dry stalls during wet weather.
- House horses in paddocks until after the morning dew has dried.
- Consider alternate source of bedding; treated wood shavings contain chemicals that may cause contact hypersensitivity in some horses.
- Keep hair in the pastern and fetlock areas clipped.
- Consider daily cleansing of the area with an antibacterial shampoo and dry the area thoroughly.
ESS Recovery Shampoo & Spray is an excellent option for your horse!
- Do not cover or bandage an area that is infected- it can get worse...keep dry and open.
- Astringent sprays are good to use after the area has been cleaned.
- Antibacterial sprays (like ESS products) or ointments (mupirocin ointment, silvadene cream, etc.) are best.
- Topical steroids should be reserved for cases of hypersensitivity or vasculitis.

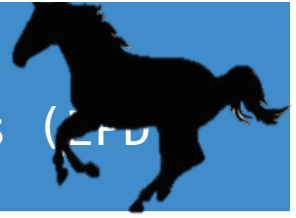


Chronic Proliferative form of EPD
Topical therapy is important in preventing/controlling chronic EPD.



EQUINE
SKIN SOLUTIONS

Equine:
Equine Pastern Dermatitis (EPD)



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