

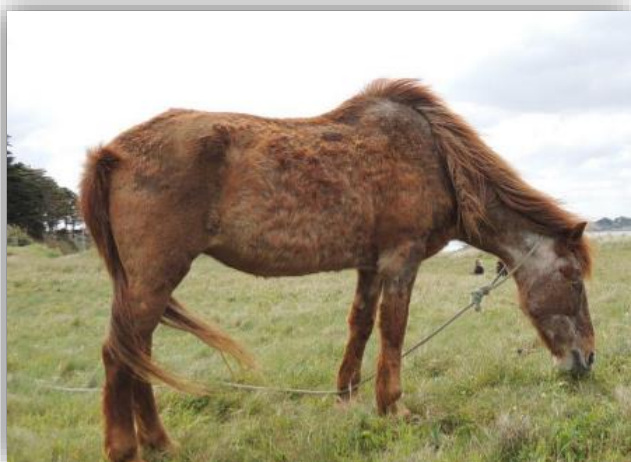
Pars Pituitary Intermedia Dysfunction (PPID) Factsheet

Update April 2020



PPID (previously known as Equine Cushings Disease) is a common condition of older horses, affecting over 20% of horses over the age of 15. It occurs due to changes in the pituitary gland. The pituitary gland is important in helping the horse control and maintain many normal bodily functions by releasing hormones; a chemical called dopamine is very important in this process. In horses with PPID, there is a lack of dopamine resulting in an overproduction of hormones by the pituitary gland, including ACTH.

What are the signs?



Long, curly coat and muscle wastage along the topline

There are many different signs of PPID, and they vary a lot between individual horses. You may see all, some or sometimes just one of the following signs:

- Long, curly coat with abnormal shedding - this is the classic sign associated with PPID; there is often excessive sweating associated with this
- Laminitis - one of the more severe signs of PPID. Even in the absence of other signs discussed, PPID should always be considered in a horse's first bout of laminitis.
- Increased infection risk - more at risk of worms, foot abscesses, mud fever, dental disease, and respiratory infections.
- Lethargy - seem quieter / more docile than normal; this change often happens very

slowly and is often considered as the horse 'getting old'

- Change in fat distribution - may see fat pads around the eyes, or a pot belly
- Weight loss - often due to muscle wastage and loss of topline
- Increased drinking and urination

How do you diagnose PPID?

The history is very important, considering any of the signs discussed above. The most common test is a blood sample to check basal ACTH and the results compared to a seasonal reference range.

Unfortunately, there is a large grey area here and the results are not always definitive. If this happens, retesting in 3-6 months or an alternative test called a TRH stimulation test are likely to be recommended. It is also useful to test glucose and insulin, both as an indicator of laminitis risk and because many ponies with the disease also have Equine Metabolic Syndrome (EMS).

Will my horse get better?

Unfortunately, there is no cure for PPID. However, with a good response to the drugs and good management, affected horses can live for many years with the disease. Severe recurrent laminitis or infections have a poorer prognosis and will require more intensive management.

How do you treat PPID?

Prasceid (pergolide) is the only available drug for the management of PPID and works by mimicking dopamine in the pituitary gland to return to normal hormone production. Sometimes you may see improvements quickly, but it often takes from 6-12 weeks to see the full benefit. Good management is also very important for treatment; this includes regular clipping, dental care, farriery, careful worming, and weight management.



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