# Efficacy of Deworming Protocols in Horses in Saudi Arabia 

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#### Abstract

Several drugs to prevent parasitic infestation are aviable for veterinaraina and horse owners these drugs are marketed as in feed or oral preparations. The ivermectin praziquantel, fenbendazole are commonly used drugs in Saudi Arabai. The goal was to examine the efficacy of the ivermectin praziquantel, fenbendazole under field conditions in Saudi Arabia. Horses were examined at horse farms and at the veterinary teaching hospital, College of Veterinary Medicine, King Faisal University. Fecal count was made following direct smear, flotation and sedimentation techniques. Ivermectin cleared the strongyles and effectively reduced Oxyuris and Dictyocaulus while the reduction of Parascaris was low. Praziquantel cleared the strongyles and Oxyuris while Dictyocaulus and Parascaris were less effectively reduced. Fenbendazole cleared the strongyles, Dictyocaulus and Oxyuris and less effectively reduced Parascaris. Variation in drug efficacy under field conditions was evident.


Key words: Parasitic, medicine, drug, fecal count, Saudi Arabia

## INTRODUCTION

The goal of control of gastrointestinal parasites in horses is to minimize the number of eggs and resultant infective L3s on the grazing areas therefore preventing clinical and subclinical diseases. Numerous types of anthelimintics are used for treating gastrointestinal parasites in horses. They are usually marketed as in feed or oral preparations. The ivermectin and moxidectine are highly effective in the treatment of strongyles, D. arnfieldi and $O$. equi parasites (Yaswinski et al., 1982; Hutchens et al., 1999; Lyons et al., 2006; Bairden et al., 2006). In contrast, P. equorum may become resistant to ivermectin and moxidectin where this resistance has been recorded in horses in the Netherlands, Canada, Germany, Swedish and USA (Boersema et al., 2002; Heran and Peregrine, 2003; Kaplan et al., 2006; Slocombe et al., 2007; Von Samson-Himmelstjerna et al., 2007; Craig et al., 2007; Lindgren et al., 2008). Oxibendazole and pyrantel salts are highly effective in the treatment of $P$. equroum infection (Lyons et al., 1974, 2006).

Other drugs that can be used in the treatment of gastrointestinal parasites in horses are fenbendazole which is highly effective in removing encysted small
strongyles in the equine large intestinal mucosa (DiPietro et al., 1997). However, unlike the large strongyle (Strongylinae) group, anthelmintic resistance is common in the cyathostominae. These parasites (cyathotomin) demonstrate resistance to two classes of anthelmintics, the benzimidazoles (benzimidazole, fenbendazole, oxfendazole) and the tetrahydropyrimidines (pyrantel) (Von Samson-Himmelstjerna et al., 2001; Kaplan, 2002). Resistance to the widely used benzimidazoles class of drugs in the treatment of cyathostomins has been documented in numerous numbers of countries throughout the world (Lyons et al., 1999). In contrast, recent studies found no indication of reduced efficacy of macrocyclic lactones in cyathostomins (Wirtherle et al., 2004; Comer et al., 2006).

Thiabendazol is apparently the most effective anthelmintic for $D$. arnfieldi in the horse. Two treatments of $440 \mathrm{mg} \mathrm{kg}^{-1}$ that are administered orally on alternative days are recommended (Round, 1976; MacKay and Urquhart, 1979). The mebendazol and oxfendazol are highly effective against pinworm (Dung et al., 2001). Pyrantel embonate is recommended for treatment of A. perfoliata in horses. Numerous numbers of studies have been conducted on the efficacy of this drug (Lyons et al., 1989; Radostits et al., 2007; Owen and

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Slocombe, 2004; Reinemeyer et al., 2006). Additionally, the effectiveness of praziquantel for the treatment of A. perfoliata is high. This drug is given at $0.75-1.0 \mathrm{mg}$ $\mathrm{kg}^{-1}$ (Lyons et al., 1998).

## MATERIALS AND METHODS

Study area: The current study was carried out in the Eastern Province of Saudi Arabia. Covered areas included horse farms that were located in Gabal Arba, Gewatha and Eastern villages in Al-Ahsa. Also, Abohedrea road in Al-Dammam and Safwa, Aljadoria, Alawjam and Alkadeeh in Al-Qatief were included. Additionally, samples were also collected from horses referred to the Veterinary Teaching Hospital at the College of Veterinary Medicine and Animal Resources, King Faisal University, Al-Ahsa. The study lasted 1 year starting in May, 2007 until April, 2008.

Collection and processing of samples: Purposive sampling was performed to conduct an epidemiological study on gastrointestinal parasites in horses at $90 \%$ level of confidence and $5 \%$ desired absolute precision and $50 \%$ expected prevalence as described by Thrusfield (1995). Samples were examined using three techniques after macroscopic examination of samples for consistency, color and presence of blood or mucus and also worms. These included direct smear, flotation and sedimentation techniques. McMaster slide was used for counting parasites ova. Micrometry using a Graticule was performed for measuring ova and larvae. Direct smear was performed to identify parasitic protozoa as described by Sloss and Kemp (1978). Flotation technique was carried out as described by Sloss et al. (1994). Sedimentation technique was used for diagnosing trematode ova (Urquhart et al., 1987). The test was carried out as described by Zajac and Conboy (2006). Fecal egg count technique was adopted using a modified McMaster technique as described by Zajac and Conboy (2006).

Statistical analysis of the data was carried out using SAS statistical program (SAS, 1986). Differences among means were detected by chi-square and t-test. The $p<0.05$ was considered significant.

## RESULTS

Not all owners used anthelmintics in their farms but some used anthelmintic drugs for the purpose of deworming. Used anthelmintic drugs were assessed for effective combat of gastrointestinal parasitic infections. The results shown in Table 1 revealed that administered drugs were not equally effective in combating parasitic infections and acted individually as clearance and/or

Table 1: Efficacy of anthelmintics

| Anthelmintics | Parasites | Deworming (\%) | No. of administered <br> horses |
| :--- | :--- | :--- | :---: |
| Ivermectin | Strongyles | $0(0)$ | 245 |
|  | P. equorum | $25(10.20)$ |  |
|  | D. arnfieldi | $2(0.81)$ |  |
|  | O. equi | $1(0.40)$ |  |
| Praziquantel | Strongyles | $0(0)$ | 12 |
|  | P. equorum | $2(16.66)$ |  |
|  | D. arnfieldi | $1(8.33)$ |  |
|  | O. equi | $0(0)$ |  |
| Fenbendazole | Strongyles | $0(0)$ |  |
|  | P. equorum | $1(16.66)$ |  |
|  | D. arnfieldi | $0(0)$ |  |
|  | O. equi | $0(0)$ |  |
| With no | Strongyles | $4(10.26)$ |  |
| administered | P. equorum | $10(25.64)$ |  |
| anthelmintics | D. arnfieldi | $4(10.25)$ |  |
|  | O. equi | $0(0)$ |  |
|  |  |  |  |

Table 2: The association between the occurrence of $P$. equorum and management and clinical factors

| Factors | Total No. | +ve | \% | $\chi$ | p-value |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Sex |  |  |  |  |  |
| Male | 128 | 8 | 6.2 | 8.100 | $0.004^{* *}$ |
| Female | 174 | 30 | 17.2 |  |  |
| Age (years) |  |  |  |  |  |
| <2 | 56 | 15 | 26.8 | 12.608 | $0.001^{* *}$ |
| $\geq 2$ | 246 | 23 | 9.3 |  |  |
| Treatment period |  |  |  |  |  |
| No treatment | 39 | 10 | 25.6 | 13.126 | $0.022^{*}$ |
| Every month | 6 | 0 | 0.0 |  |  |
| Every 2 month | 50 | 1 | 2.0 |  |  |
| Every 3 month | 4 | 1 | 25.0 |  |  |
| Every 4 month | 15 | 1 | 6.7 |  |  |
| Every 6 month | 188 | 25 | 13.3 |  |  |
| Locality |  |  |  |  |  |
| Al-Ahsa | 202 | 29 | 14.3 | 7.531 | $0.023^{*}$ |
| Al-Dammam | 44 | 0 | 0.0 |  |  |
| Al-Katief | 56 | 9 | 16.1 |  |  |
| Symptoms |  |  |  |  |  |
| No signs | 28 | 22 | 57.9 | 62.117 | $0.001^{* *}$ |
| Colic | 2 | 2 | 5.3 |  |  |
| Emaciation | 8 | 4 | 10.5 |  |  |
| Coughing | 10 | 9 | 23.7 |  |  |
| Itching | 1 | 0 | 0.0 |  |  |
| Nasal discharge | 1 | 1 | 2.6 |  |  |

reduction of parasitic load was observed as if, each nematode responded more to the effect of a specific anthelmintic. According to the obtained results, ivermectin cleared the strongyles and effectively reduced Oxyuris and Dictyocaulus while the reduction of Parascaris was less effective. Praziquantel cleared the strongyles and Oxyuris while Dictyocaulus and Parascaris were less effectively reduced. Fenbendazole cleared the strongyles, Dictyocaulus and Oxyuris and less effectively reduced Parascaris.

Factors that may have effects on the occurrence of parasitic load were put in consideration. Therefore, such considered factors included; sex, age, treatment period, locality, season and symptoms. The occurrence of $P$. equorum with sex, age and symptoms was highly

Table 3: Factors associated with the occurrence of $D$. arnfieldi

| Factors | Total No. | +ve | $\%$ | $\chi$ | p-value |
| :--- | ---: | ---: | ---: | ---: | ---: |
| Anthelmintics |  |  |  |  |  |
| No treatment | 39 | 4 | 10.2 | 15.355 | $0.002^{* *}$ |
| Ivermectin | 257 | 2 | 0.8 |  |  |
| Fenbendazole | 6 | 0 | 0.0 |  |  |
| Treatment period |  |  |  |  |  |
| No treatment | 39 | 4 | 10.2 | 14.722 | $0.012^{*}$ |
| Every month | 6 | 0 | 0.0 |  |  |
| Every 2 month | 50 | 2 | 4.0 |  |  |
| Every 3 month | 4 | 0 | 0.0 |  |  |
| Every 4 month | 15 | 0 | 0.0 |  |  |
| Every 6 month | 188 | 1 | 0.5 |  |  |


| Table 4: Factors affecting the occurrence of strongyles |  |  |  |  |  |
| :--- | ---: | :---: | ---: | :---: | :---: |
| Factors | Total No. | +ve | $\%$ | $\chi$ | p-value |
| Seasons |  |  |  |  |  |
| Warm | 171 | 0 | 0.0 | 5.291 | $0.021^{*}$ |
| Cold | 131 | 4 | 3.1 |  |  |
| Anthelmintics |  |  |  |  |  |
| No treatment | 39 | 4 | 10.2 | 27.336 | $0.001^{* *}$ |
| Ivermectin | 257 | 0 | 0.0 |  |  |
| Fenbendazole | 6 | 0 | 0.0 |  |  |
| Symptoms |  |  |  |  |  |
| No signs | 28 | 1 | 25.0 | 53.629 | $0.001^{* *}$ |
| Colic | 2 | 0 | 0.0 |  |  |
| Emaciation | 8 | 3 | 75.0 |  |  |
| Coughing | 10 | 0 | 0.0 |  |  |
| Itching | 1 | 0 | 0.0 |  |  |
| Nasal discharge | 1 | 0 | 0.0 |  |  |

${ }^{* *}$ High significance ( $p<0.005$ ); ${ }^{*}$ Significance ( $p<0.05$ )
significant ( $p<0.005$ ) while the treatment period and locality were just significant ( $\mathrm{p}<0.05$ ) as shown in Table 2.

The occurrence of $D$. arnfieldi with the anthemintics was highly significant ( $p<0.005$ ) and with the treatment period was only significant ( $\mathrm{p}<0.05$ ) as shown in Table 3. The occurrence of strongyles with anthelmintics and symptoms was highly significant ( $\mathrm{p}<0.005$ ) while the season factor was only significant ( $\mathrm{p}<0.05$ ) as shown in Table 4.

## DISCUSSION

In the current investigation it was found that susceptibility of $P$. equorum to ivermectin was remarkably low. This was not surprising since it is well documented that this parasite is fairly resistant to ivermectin (Boersema et al., 2002; Slocomb et al., 2007; Von Samson-Himmelstjerna et al., 2007; Craig et al., 2007; Lindgren et al., 2008). On the other hand, other researchers found that preventive treatment of animals every month, significantly reduced the prevalence of $P$. equorum to a very low level ( $\mathrm{p}<0.022$ ) (Boyle and Houston, 2006).
D. arnfieldi infection in horses is characterized by a chronic cough (Radostits et al., 2007). This was evident in the current researchers in which cough was associated with $D$. arnfieldi in the examined horses. Horse owners
who used ivermectin and fenbendazole as prophylaxis had successful outcome at highly significant level ( $\mathrm{p}<0.002$ ) in combating such parasite. It is known that ivermectin and fenbendazole are efficient as prophylaxis against this parasite and have been recommended to be given at regular intervals (every month). In the current investigation such monthly intervals had shown a significant level of effect ( $\mathrm{p}<0.012$ ) in combating this parasite (Kahn et al., 2006; Radostits et al., 2007; Hutchens et al., 1999; Britt and Preston, 1985). The discrepancy amongst those prevalence rates in different areas could be a result of the use of ivermectin. In fact, the use of ivermectin has reduced the prevalence of D. arnfieldi over the last 20 years (Boyle and Houston, 2006). D. arnfieldi infection should be addressed in the routine worm control programs of all horses and ponies co-grazing with donkeys. One of the most effective ways to prevent $D$. arnfieldi infection is by not exposing horses to the parasite by preventing horses from grazing with untreated donkeys, mules, unless they are confirmed to be free of lung worms. A similar regimen should be practiced in donkey studs where the visiting animals should be isolated in separate paddocks (Urquhart et al., 1987; Reed et al., 2004; Boyle and Houston, 2006).

Ivermectin and fenbendazole are highly effective against strongyles infection in horses (Lyons et al., 2006; DiPietro et al., 1997; Slocombe and McCraw, 1984). In this study, the use of ivermectin and fenbendazole as prophylaxis against strongyles infection showed a high significance ( $\mathrm{p}<0.001$ ) in reducing infections in horses. Limited number of cases were found positive for $O$. equi which makes it difficult to draw conclusion. $O$. equi is easily controlled since most available equine anthelmintics are highly effective against both mature and adult large pinworms (Bowman et al., 2003). In O. equi infection the control depends on high standard of stable hygiene. Effective control measurements such as careful, regular washing at 4 days intervals of the perineal skin and underside of the tail head for removing egg masses before the development of L3 are adequate (Kassai, 1999).

## CONCLUSION

In this study the results shows that most of the gastrointestinal parasites that were detected in horses in the Eastern Province of the Kingdom of Saudi Arabia were nematodes and protozoa in spite of the deworming programs. The risk factors varied between parasites, however, treatment with ivermectin was found to be significantly effective only against some group of parasites. The importance of deworming rotation program cannot be overemphasized.

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