



Cleary Lake Veterinary Hospital
www.clearylakevets.com
952-435-VETS (8387)

Equine Deworming Protocol

Based on 2024 AAEP Guidelines

Fecal Egg Counts (FEC): This is a laboratory test that counts strongyle eggs (large or small strongyles) in “eggs per gram” of feces and can identify if ascarid (roundworm) eggs are present. It stratifies horses into “low,” “medium,” and “high” shedders. This is important to determine how frequently each horse should be dewormed.

LOW: <200 eggs per gram **MEDIUM:** 200-500 eggs per gram **HIGH:** >500 eggs per gram

The FEC result does not correlate with the horse’s parasite burden, and it cannot be used to diagnose disease related to internal parasites. It does not indicate a risk of disease or possible adverse reactions to deworming.

FECs are used to: 1) Determine efficacy of dewormers using fecal egg count reduction tests
2) Determine strongyle egg shedding status of adult horses (most horses maintain the same level of egg shedding throughout their lives)
3) Determine makeup of parasite burdens in foals & weanlings (roundworms, strongyles, or both)

FECs cannot detect all stages of parasites, differentiate between large and small strongyles, or reliably detect tapeworms, pinworms, or bots.

We recommend all horses have a FEC done once yearly prior to deworming. FEC reduction tests should be done on medium and high shedders 2 weeks after deworming.

PRO TIP: At any given barn, do all baseline fecal sampling and deworming on the same day for best results (spring vaccine day is a great choice, then late fall after a hard frost!)

REMEMBER: Do NOT use “rotational deworming” - it will increase parasite resistance! Think of parasite control as more for the HERD than any one INDIVIDUAL horse.

Anthelmintic Drugs & Resistance

Benzimidazoles: oxibendazole (Anthelcide EQ®), fenbendazole (Panacur®, Safe-Guard®)

- ❖ Used for ascarids (roundworms) & pinworms; strongyles are resistant to these drugs
- ❖ 5-day “Panacur PowerPacs” were used for encysted small strongyles, but efficacy is now poor

Pyrimidines: pyrantel (Strongid®, Exodus®)

- ❖ Used for ascarids (roundworms); strongyles are resistant to this drug
- ❖ Double dose previously used for tapeworms, but they are developing resistance to this drug

Macrocyclic lactones: ivermectin (many brands), moxidectin (Quest®)

- ❖ Used for large & small strongyles; roundworms & pinworms are resistant to these drugs
- ❖ Both drugs have partial efficacy against bot larvae; ivermectin is slightly more effective
- ❖ Moxidectin (NOT ivermectin) is used for encysted small strongyles, but efficacy is only 50-70%

Praziquantel (component of Equimax®, Quest Plus®)

- ❖ Use 1-2x/year for tapeworms; only available in combination with ivermectin or moxidectin

Adult Horse Deworming Schedule

GOALS: Reduce strongyle infection pressure by reducing the overall strongyle egg output in the herd. The goal is NOT to eliminate all small strongyles; all horses have them and they only rarely cause disease. Large strongyles DO cause disease but are fairly rare in the United States. Our target parasites are strongyles, tapeworms, and bots (bots only cause mild disease).

All horses (low/medium/high shedders)

- ❖ Perform fecal egg count prior to deworming in spring
- ❖ Spring — late March/early April: Equimax® (ivermectin/praziquantel)
- ❖ Fall — late October/early November (after hard frost): Quest Plus® (Moxidectin/praziquantel)
- ❖ Winter — Deworming is not necessary

Medium shedders:

- ❖ Perform fecal egg count reduction test 2 weeks after spring deworming
- ❖ In mid-late summer — July: treat with ivermectin

High shedders:

- ❖ Perform fecal egg count reduction test 2 weeks after spring deworming
- ❖ In mid-summer — June/July: treat with ivermectin
- ❖ In late summer — August/September: treat with ivermectin

While the majority of adult horses remain in the same shedding category throughout their lives, senior horses and those with PPID (Cushing's) can revert from low to high-shedder status.

Foal/Weanling/Youngster Deworming Schedule

GOALS: Target parasites are ascarids, strongyles, & tapeworms. Use FECs to monitor for ascarids.

Foals/Weanlings:

- ❖ 2-3 months of age: treat with oxibendazole according to estimated weight
- ❖ 5 months of age: perform a fecal egg count; then treat with oxibendazole or fenbendazole
- ❖ 7-9 months of age: perform a fecal egg count; then treat with ivermectin/praziquantel. Follow with oxibendazole or fenbendazole if ascarids are still seen in the FEC

Yearlings:

- ❖ Perform a fecal egg count in spring to check for continued presence of ascarids
- ❖ Follow the high shedder protocol for anti-strongyle treatments (most will be >1,000 eggs per gram)

2- and 3-year olds:

- ❖ Perform a fecal egg count in spring
- ❖ Follow the medium or high shedder protocol for anti-strongyle treatments (they will gradually decrease their strongyle shedding level)

Pregnant mares:

- ❖ Treat normally based on FECs
- ❖ The benefits of deworming on the day of foaling are controversial, but the mare should be dewormed in the spring as usual if not done at or near foaling